



COUNTY OF SURREY

BOROUGH OF EPSOM AND EWELL



Annual Report


of the
MEDICAL OFFICER OF HEALTH
and
SCHOOL MEDICAL OFFICER

for the Year

1965

1. ~~Dr. Didsbury~~ ~~C.407~~
2. ~~Mr. Morley Parry~~ ~~A.419~~
3. ~~Mr. Perry~~ ~~A.405~~
4. ~~Miss Pidgeon~~ ~~A.408~~
5. ~~Mr. H.M. Robins~~ ~~B.1414~~

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BOROUGH OF EPSOM AND EWELL

PUBLIC HEALTH COMMITTEE AS CONSTITUTED AT 31st DECEMBER, 1965

Chairman : Alderman W. J. CLARK, F.I.A.S., F.R.S.A., F.R.S.H.

Vice-Chairman : Alderman W. J. D. GODSELL

Councillors E. CLARK, Mrs. D. J. FENDER, J. R. GALE, T. G. HOLLAND, C. JOHNSON, R. NOTT,
Mrs. K. PYLE, J. N. PYLE, J. M. SALT, R. W. SMITH, J. A. G. WEBB

Ex Officio Members

THE MAYOR (Councillor L. F. WOOLCOTT, J.P.)

DEPUTY MAYOR (Alderman Mrs. L. M. WOODCOCK, J.P.)

STAFF OF THE HEALTH AND WELFARE DEPARTMENT AT 31st DECEMBER, 1965

Medical Officer of Health

PATRICK H. R. ANDERSON, B.Sc., M.D., D.P.H., D.OBST.R.C.O.G.

Assistant Medical Officers

DAPHNE M. KIRKMAN, M.R.C.S., L.R.C.P., M.B., B.S., D.C.H., D.P.H.

BARBARA C. ACUTT, M.B., CH.B., D.C.H. (*part-time*)

Dental Officers

GODFREY ASHWORTH, L.D.S., H.D.D., F.D.S.

MARIE B. EGERTON, L.D.S., R.C.S.

Chief Public Health Inspector

L. H. GRACE, F.R.S.H., M.A.P.H.I.

*(Holds Sanitary Science Certificate of the Royal Society of Health and the
Royal Society of Health Certificate as Inspector of Meats and other foods)*

Deputy Chief Public Health Inspector

WM. C. ALDER, A.R.S.H., M.A.P.H.I.

(Holds the Royal Society of Health Certificate as Inspector of Meats and other foods)

Public Health Inspectors

W. H. GRAY, M.A.P.H.I.

*(Holds the Royal Society of Health Certificate as Inspector of Smoke and the
Royal Society of Health Certificate as Inspector of Meats and other foods)*

M. G. ILLMAN, M.A.P.H.I.

*(Holds the Royal Society of Health Certificate as Inspector of Smoke and the
Royal Society of Health Certificate as Inspector of Meats and other foods)*

P. H. FROST, M.A.P.H.I.

(Holds the Royal Society of Health Certificate as Inspector of Meats and other foods)

Pupil Public Health Inspector

D. R. JOHNSON

Borough Nursing Officer

Miss J. DORRINGTON, S.R.N., S.C.M., H.V.CERT.

Domiciliary Nurses and Midwives

(a) Whole-Time

Miss K. M. Duncombe, S.R.N., S.C.M., Q.N.
(Senior Nurse)

Mrs. F. A. Fawehimni, S.R.N., S.C.M., Q.N.

Mrs. D. E. House, S.R.N.

Mrs. M. M. Keenan, S.R.N., R.M.N.

Miss J. Mills, S.R.N., S.C.M., Q.N.

Miss T. Williams, S.R.N., S.C.M., Q.N.

Miss E. M. Dyer, S.R.N., S.C.M., Q.N.
(Senior Nurse)

Miss J. Henderson, S.R.N., S.C.M., Q.N.

Mrs. M. J. Hunton-Young, S.R.N., Q.N.

Mrs. G. Mackay, S.E.A.N.

Mr. L. C. Pretty, S.R.N., Q.N.

(b) Part-Time

Mrs. T. E. Bent, S.R.N.

Miss B. M. Cordery, S.R.N., S.C.M.

Mrs. E. Blatchley, S.R.N., S.C.M.

Mrs. D. A. Evans, S.R.N.

Mrs. M. C. Jones, S.R.N.

(c) Nursing Auxiliary

Mrs. A. W. Williams, N.N.C.

Health Visitors

Mrs. C. C. Cotton, S.R.N., S.C.M., H.V.CERT.

Miss J. M. Headley, S.R.N., S.C.M., H.V.CERT.

Miss F. A. Ponting, S.R.N., S.C.M., H.V.CERT.

Mrs. D. A. Sharpe, S.R.N., S.C.M., H.V.CERT.

Miss M. P. Turner, S.R.N., S.C.M., H.V.CERT.

Mrs. S. E. Donovan, S.R.N., S.C.M., H.V.CERT.

Miss J. R. Lowe, S.R.N., S.C.M., H.V.CERT.

Mrs. J. A. Pugh, S.R.N., S.C.M., H.V.CERT.

Miss E. H. Spencer, S.R.N., S.C.M., H.V.CERT.

Mrs. E. Y. Wright, S.R.N., S.C.M., H.V.CERT.

Medical Social Worker

Miss G. M. Wise, A.M.I.A.

Home Help Supervisor

Mrs. D. E. Tapping

Mental Welfare Officer

D. Hodgson

Social Worker for Mental Health

Mrs. M. Fuhr

Home Teacher for the Blind

Miss M. Franklin

Welfare Officer to the Deaf

Miss E. M. Vousden, A.M.W.I.

Chiropodist

Mrs. A. Dearlove, M.Ch.S.

Physiotherapist

Mrs. B. Gilbert, M.C.S.P.

Social Worker for the Physically Handicapped

Mrs. M. Cowles, B.Sc. (Soc.)

Clerical Staff of the Medical Officer of Health

(Administrative Assistant) R. A. Stay

Mrs. P. A. V. Davies

Mrs. K. F. Dickson

Mrs. G. F. Mitchell

Miss A. Lock

(Part-time) Mrs. F. M. Black

R. E. Thorpe (Senior Clerk)

Miss T. Longhurst

Miss W. Warwick

Miss L. Wiggan

Miss J. Mansell (from 3.1.66)

Mrs. L. L. Harvey (Part-time)

Chief Public Health Inspector's Clerical Staff and Outdoor Staff

H. J. T. Woolford, A.R.S.H.

Miss D. D. Wood

(Outside Assistant) J. I. Stephens

W. J. Jenkins

Mrs. J. Bulezuik

A. Bawden (Rodent Operative)

Dental Surgery Assistants

Miss D. M. Jopp

Mrs. J. Holladay

Matron of Day Nursery

Mrs. R. Hyland, S.R.N. (Waltham House Day Nursery)

To the Mayor, Aldermen and Councillors of the Borough of Epsom and Ewell

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit the Annual Report of the Medical Officer of Health for 1965. The request for this is made in Ministry of Health Circular 1/66 in which there is reference to Regulation 5(3) and 15(5) of the Public Health Officers Regulations 1959. The report is in a form which meets the requirements of the Ministry as summarised in the letter.

To date, the emphasis of the health services has been on the treatment of acute episodes of disease and of chronic disease with its recurrences. The future emphasis must be on maintaining and improving health by means of health education, by multiple screening, e.g. cervical smears, mass radiography, tests for anaemia, urine examination. These tests will reveal the earliest manifestations of disease at a time when it most readily yields to treatment.

The Registrar General's estimated population was 71,980 an increase of 280 on the previous year. The number of deaths from all causes rose from 1,054 to 1,083 giving a crude death rate of 15.0 compared with 14.7 in 1964. The live birth-rate, the highest recorded since 1947, was 13.0.

The expected bi-ennial epidemic of measles occurred, 825 notifications were received compared with 131 in 1964. No cases of poliomyelitis or diphtheria were notified. There was a marked fall in the notifications of respiratory tuberculosis, 12 in place of 37 notified in 1964, four of which were in the 25-44 age group compared with 13 in that group in the previous year.

Again I am indebted to the Chief Public Health Inspector, Mr. L. H. Grace, who has submitted a comprehensive report on the work of the Public Health Inspectors throughout the year.

I am grateful to the Public Health Committee for their support in the development of the Personal Health and Welfare Services. In the field of environmental health, I am fortunate in having had the valuable co-operation of colleagues in other departments and the loyal support of an enthusiastic staff.

I am, Mr. Mayor, Aldermen and Councillors, Your obedient Servant,

PATRICK H. R. ANDERSON

Medical Officer of Health

PART ONE

GENERAL

AND

STATISTICAL

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1965

VITAL STATISTICS FOR THE YEAR

Area (acres)	8,427
Population (Census 1961)	71,159
Population (estimated mid-year 1965)	71,980
Density (persons per acre)	8.54
Number of inhabited houses at 31.12.65	21,407
Rateable value at 31.12.65	£3,808,143
Product of Penny Rate	£15,447

Live Births	<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate	431	432	863
Illegitimate	36	34	70
	<hr/>	<hr/>	<hr/>
	467	466	933

Live birth rate per 1,000 population	13.0
Standardised birth rate	14.7
Illegitimate live births per cent. of total live births	7.5

Still Births			
Legitimate	5	4	9
Illegitimate	1	—	1
	<hr/>	<hr/>	<hr/>
	6	4	10

Still birth rate per 1,000 live and still births	10.6
--	------

Deaths	<i>Male</i>	<i>Female</i>	<i>Total</i>
Private Residents			746
Patients in Mental Hospitals			337
	<hr/>	<hr/>	<hr/>
	497	586	1,083

Crude death rate	15.0
Standardised death rate	9.45

Deaths of Infants under 1 year of age	<i>Male</i>	<i>Female</i>	<i>Total</i>
Legitimate	10	4	14
Illegitimate	—	—	—
	<hr/>	<hr/>	<hr/>
	10	4	14

<i>Infant mortality rate per 1,000 live births :</i> Total	15.0
Legitimate	16.2
Illegitimate	—

Deaths of Infants under 1 year of age

Neonatal Mortality

Number of deaths of infants under 4 weeks of age	11
Neonatal mortality rate per 1,000 live births	11.8

Early Neonatal Mortality

Number of deaths of infants under 1 week of age	10
Early neonatal mortality rate per 1,000 live births	10.7

Perinatal Mortality

Still births and deaths under 1 week per 1,000 live births	21.4
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Maternal Mortality

Maternal deaths (including abortions)	Nil
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POPULATION

The Registrar General's estimate of population for 1965 was 71,980 and this figure has been used for statistical purposes in the preparation of this report. The estimate is 280 higher than in the previous year.

The number of deaths exceeds the number of live births by 150. This apparently high proportion of deaths is in part accounted for by the large number of elderly patients in the five mental hospitals in the Borough. The number of occupied beds in the mental hospitals was 6,551 compared with 6,534 in 1964.

Births

Live births totalled 933 representing a birth rate of 13.0 per thousand population. The Registrar General, by providing a comparability factor (1.13 for Epsom), makes adjustments in respect of each area having regard to variations in age and sex distribution of population and the influence on the birth rate of the large institutions in this district. By applying the comparability factor to the crude birth rate the standardised birth rate of 14.7 is obtained, compared with the figure of 18.1 for England and Wales in 1965.

Deaths

The number of deaths assigned by the Registrar General was 1,083 compared with 1,054 in 1964. Of this total 337 occurred in the local mental hospitals in patients whose stay exceeded six months. Where death occurred within six months of admission the death was assigned to the district from which the patient had come. The crude death rate was 15.0 per 1,000 total resident population. By applying the Registrar General's comparability factor, 0.63, to the crude death rate a standardised death rate of 9.45 is obtained compared with the figure of 11.5 for England and Wales in 1965.

Causes of Death

The causes of death are classified in Table III, the total deaths amounting to 1,083. Diseases of the heart and blood vessels accounted for 499 deaths (466 in 1964), malignant diseases 185 (187 in 1964) and respiratory diseases 191 (182 in 1964).

It is a fact that in the county as a whole degenerative heart disease is now responsible for approximately half of all deaths and our local figures bear this out.

Accidental Deaths

Road accidents involving motor vehicles accounted for 11 deaths—three more than in 1964.

Accidents Other than Road Accidents

These numbered seven as compared with 18 in 1964, three deaths were the result of falls in elderly persons, one was caused by barbiturate poisoning, two by laryngeal obstruction when swallowing food and the last the result of severe injury from a motor mower.

Suicide

Out of a total of 16 deaths, 11 occurred at home and 5 in mental hospitals. Of the deaths at home, four were by hanging, two by barbiturate poisoning, two by carbon monoxide poisoning, two by aspirin poisoning and one from haemorrhage following a throat injury. Of the deaths in mental hospitals, two were by hanging, one by insulin poisoning, one by aspirin poisoning and one by narcotic poisoning.

Infant Mortality

The infant mortality rate (i.e. deaths of infants under one year per 1,000 live births) was 115.0 for the Borough. This compares favourably with a figure of 19.0 for England and Wales. Of the 14 deaths, 11 occurred during the first week of life and were mainly due to prematurity, congenital malformation and birth injury. Of the three deaths which occurred after the first week, one was due to congenital heart and two were due to infection.

Maternal Mortality

There were no maternal deaths in 1965.

TABLE I

COMPARATIVE BIRTH, DEATH AND MATERNAL MORTALITY RATES, AND
INCIDENCE RATES OF INFECTIOUS DISEASE FOR THE YEARS 1964 AND 1965

<i>Rates per 1,000 Population</i>	1965	1964
Births		
Live birth rate (crude)	13.0	12.8
Deaths		
All causes (crude)	15.0	14.7
Typhoid and Paratyphoid	—	—
Whooping Cough	—	—
Diphtheria	—	—
Tuberculosis	0.03	0.04
Influenza	0.01	—
Smallpox	—	—
Poliomyelitis	—	—
Pneumonia	1.96	1.88
Measles	—	—
Incidence of Infectious Diseases		
Typhoid	0.01	0.01
Paratyphoid	—	0.01
Meningococcal Infections	—	—
Scarlet Fever	0.44	0.39
Whooping Cough	0.18	0.57
Diphtheria	—	—
Erysipelas	0.04	0.01
Smallpox	—	—
Measles	11.40	1.83
Pneumonia	0.14	0.04
Poliomyelitis : Paralytic	—	—
Non-Paralytic	—	—
Food Poisoning	0.18	0.32
Dysentery	0.28	0.71
Tuberculosis : Respiratory	0.17	0.52
Non-Respiratory	0.04	0.06
Puerperal Pyrexia	0.01	—
Infant Mortality		
<i>Rates per 1,000 Live Births</i>		
Under 1 year of age	15.0	18.5
Under 4 weeks of age (neonatal)	11.8	15.2
Under 1 week of age (early neonatal)	10.7	14.1
<i>Rates per 1,000 Total (Live and Still) Births</i>		
Still Births	10.6	7.5
Perinatal Mortality	21.4	21.6

TABLE II
COMPARATIVE BIRTH, DEATH AND MORTALITY RATES 1881-1965

	BIRTH RATE PER 1,000 POPULATION		DEATH RATE PER 1,000 POPULATION*		MORTALITY RATES PER 1,000 LIVE BIRTHS OF CHILDREN UNDER ONE YEAR OF AGE	
	<i>England and Wales</i>	<i>Epsom and Ewell</i>	<i>England and Wales</i>	<i>Epsom and Ewell</i>	<i>England and Wales</i>	<i>Epsom and Ewell</i>
1881-1890	32.4	26.2	19.1	14.5	142.0	107.0
1891-1900	29.9	22.9	18.2	13.7	153.0	121.0
1901-1910	27.2	24.9	15.4	11.7	128.0	93.0
1911-1920	21.8	18.2	14.3	11.5	100.0	71.0
1921-1930	18.3	16.1	12.1	9.8	72.0	49.0
1931-1940	14.9	12.6	12.3	7.3	58.0	41.0
1941-1950	16.9	14.2	12.3	9.4	43.1	28.4
1951-1960	15.8	10.4	11.6	15.0	24.8	19.1
1961	17.4	11.4 (13.6)	12.0	14.0 (9.5)	21.6	23.8 (19) <i>deaths</i>
1962	18.0	12.5 (14.7)	11.9	15.4 (10.2)	21.6	13.7 (12) <i>deaths</i>
1963	18.2	12.6 (14.2)	12.2	15.8 (9.9)	20.9	27.0 (24) <i>deaths</i>
1964	18.4	12.8 (14.5)	11.3	14.7 (9.3)	20.2	18.5 (17) <i>deaths</i>
1965	18.1	13.0 (14.7)	11.5	15.0 (9.45)	19.0	15.0 (14) <i>deaths</i>

* *Deaths of patients in mental hospital included from 1953. From 1956 the standardised death rate allows for the high mortality in residential institutions, such as hospitals for mental illness.
(Bracketed figures represent standardised rates)*

TABLE III
CAUSES OF DEATH IN THE BOROUGH OF EPSOM AND EWELL

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Tuberculosis, respiratory	—	1	1
Tuberculosis, other	—	1	1
Syphilitic Disease	1	3	4
Other Infective and Parasitic Diseases	1	—	1
Malignant neoplasm, stomach	9	4	13
Malignant neoplasm, lung, bronchus	37	10	47
Malignant neoplasm, breast	—	19	19
Malignant neoplasm, uterus	—	8	8
Other malignant and lymphatic neoplasms	48	42	90
Leukaemia, Aleukaemia	2	6	8
Diabetes	2	3	5
Vascular lesions of nervous system.	64	69	133
Coronary disease, angina	109	77	186
Hypertension with heart disease	2	13	15
Other heart disease	33	81	114
Other circulatory disease	17	34	51
Influenza	—	1	1
Pneumonia	57	86	143
Bronchitis	28	13	41
Other diseases of respiratory system	2	4	6
Ulcer of stomach and duodenum	6	1	7
Gastritis, Enteritis and Diarrhoea	2	2	4
Nephritis and Nephrosis	3	4	7
Hyperplasia of prostate	7	—	7
Congenital malformations	2	7	9
Other defined and ill-defined diseases	45	83	128
Motor vehicle accidents	7	4	11
All other accidents	5	3	8
Suicide	8	7	15
Total	497	586	1,083

SERVICES UNDER THE PUBLIC HEALTH ACTS

Water Supply

The source of the Borough's water supply remains unchanged. Epsom including the local hospitals, is supplied from the deep chalk wells of the Council's undertaking in East Street. It is the routine practice for the Borough Water Engineer to send weekly samples of raw water to the Counties Public Health Laboratories in London. Ewell is supplied mainly from the Sutton District Water Company's Chalk Wells in Carshalton Road, Sutton, and in Woodmansterne. Samples of raw water were taken on six days weekly and examined by the Company's Chemist and Bacteriologist and in addition monthly samples were submitted to the Counties Public Health Laboratories. A small part of the Borough in the Stoneleigh-Worcester Park area is supplied by the Metropolitan Water Board (River Thames). Part of the West Park Hospital supply, about 30,000 gallons per day, is pumped from a deep well on the site. The Public Health Inspectors submitted 41 samples of raw water from this well to the Public Health Laboratory in Epsom. The reports on the raw water from all these sources were satisfactory.

Chlorination of all raw water was carried out before it was put into supply. The Public Health Inspectors submitted 328 samples of tap water going into supply, to the Public Health Laboratory in Epsom, all but three were reported as satisfactory.

The chemical analyses of the water from the Borough's undertaking and from the Sutton District Water Company were reported on at regular intervals and below are given typical results.

The fluoride content in the Sutton and District Water Supply was reported to be 0.1 part per million or less and to be not more than a trace in the Epsom Wells Supply.

No serious shortage of water was reported throughout the year. Every house in the Borough is supplied direct from the mains. The occupants of all 81 caravans were supplied from stand-pipes and four were on domestic supply. One house, isolated in the middle of a wood, was dependent on rain water storage.

Typical results of chemical examination of water are set out in parts per million.

	<i>Epsom and Ewell Corporation</i>	<i>Sutton District Water Company</i>
Appearance	Bright and Clear	Bright with slight white deposit of minute particles of calcium carbonate
Colour	Faint Greenish Blue	Nil
Odour	Nil	Slightly chlorinous
pH	7.3	7.7
Electric Conductivity	380	230
Dissolved solids dried at 180°C	256	155
Chlorine as Chloride	19	18
Free Carbon Dioxide		3
Alkalinity as Calcium Carbonate	142	80
Hardness : Total	186	105
Carbonate	142	80
Non-Carbonate	44	25
Nitrate Nitrogen	7.2	5.6
Nitrite Nitrogen	0.02	absent
Ammoniacal Nitrogen	0.00	0.12
Oxygen absorbed	0.08	0.10
Albuminoid Nitrogen	0.01	0.00
Residual Chlorine	absent	0.17
Metals : Iron	absent	absent
Zinc	absent	absent
Copper	absent	absent
Lead	absent	absent

Sewage and Sewage Disposal

The sewage from the Borough is piped to the disposal works administered by the Hogsmill Valley Joint Sewage Board in the London Borough of Kingston-upon-Thames. This arrangement works satisfactorily and prevents any untreated sewage effluent being discharged into local streams.

Cesspools

There were 47 cesspools in the Borough. Pail closets were in use at 82 caravans and at nine other premises.

Public Cleansing

The Borough Engineer and Surveyor controls the organisation of Public Cleansing. Refuse, both household and trade, was collected weekly and disposed of at the Council tip off East Street. Plans are in operation for the construction of a maceration plant in Longmead which, after elimination of glass and metal, will produce a relatively harmless final product. I am glad to report that when the new plant becomes operative, the present tip will no longer be used.

Caravan Site at West Ewell

I am glad to be able to report that with the acquisition of the land on which the caravans are located, the Council are planning to provide the caravan dwellers with at least a minimum standard of hygiene. Improvements, which are now in progress, will include :

- the provision of surface drainage of the site,
- closets with water carriage system,
- a laundry block,
- adequate spacing of the caravans,
- hard standings and footpaths,
- increase in number of water points,
- the laying on of a supply of electricity.

Swimming Baths and Pools

The Municipal Baths were open from April to October. The total attendances were 113,784. The water supplied from pipe mains was subjected to continuous filtration and chlorination throughout the season—46 samples were submitted for bacteriological examination and all except three were reported as satisfactory. There is one privately owned open-air swimming pool in the Borough open to the general public and one open-air pool owned by a large Club. Both pools are equipped with efficient chlorination plants.

All three school bathing pools in the Borough were kept under supervision and were maintained in a satisfactory state of cleanliness.

Epsom Downs

Throughout the year, except during the coldest weather, many parties of people from widely scattered areas visit the Downs at week-ends. Although a small number make use of the few restaurants on the periphery, no sanitary convenience exists for the great majority and this major omission results in the inevitable widespread fouling of the area. From year to year more and more visitors, including organised parties, pay frequent and regular visits to the Downs and this means an increasing risk of water pollution in the gathering ground of the local water undertakings. I am pleased to report that the Council have agreed in principle to build a permanent sanitary convenience connected to the existing sewer and open to the public all the year round, subject to satisfactory arrangements being made with the Epsom Grand Stand Association.

Sanitary Inspection of the Area

The work carried out by the Health Inspectors on the sanitary supervision of the District is detailed in the Report of the Chief Public Health Inspector.

Housing

It is common knowledge that a good standard of housing is essentially bound up with the health of the people and that housing ought to be our first priority. Although there is a lengthy waiting list and a number of houses due for demolition under slum clearance, the Council's building programme for re-housing is well advanced. For medical reasons, members of the public are referred in increasing numbers for re-housing or transfer.

I am indebted to the Borough Engineer for information about the number of new dwellings erected during the year.

Erected by the local authority	.	.	.	41
Erected by private enterprise	.	.	.	228

At the end of the year 706 applicants were on the Council's waiting list for re-housing.

The Council's building project for the housing of the elderly at Tomlin Court, Hook Road, was completed in July 1965 and all 32 flats and eight bungalettes are occupied. They are situated at a safe distance from the main road and close to a bus stop. The tenants enjoy such amenities as central heating, adequate hot water supply (both of which are included in the rent charges), a bath and indoor W.C. In each dwelling is a bell push by which the residents may communicate

with the Warden in the case of emergency. The resident couple who act as Wardens give the occupants practical help and friendly supervision and aided by voluntary organisations they provide a variety of social activities which are particularly welcome.

Slum Clearance

An inspection of premises during the year confirmed the findings of a survey done in 1964 that nearly 200 dwellings were unfit and beyond repair at a reasonable cost. During the year 14 dwellings were represented as unfit under Section 16 of the Housing Act 1959 and seven dwellings were included in a Clearance Area and represented under Section 157(1). Now that the Longmead (106 dwellings) and Ruxley Farm (260 dwellings) Council Housing Developments are well advanced, alternative accommodation for the occupants of unfit houses due for demolition or closure, will be more readily available.

The work of the Public Health Inspectorate is of real value especially in the arduous task of assessing the state of existing houses and of taking steps to bring them into a sound state of repair. The Chief Public Health Inspector's report and its accompanying tabulated statements show something of the scope of the work involved.

Clean Air Act, 1956

The Chief Public Health Inspector is able to report on a gradual reduction in Smoke Pollution as measured at the two Smoke and Sulphur Dioxide recording stations which serve as part of the National Survey of Air Pollution. The Council have, by extensive propaganda, encouraged the use of smokeless fuel. In this Borough the domestic chimney is the worst offender but with the increasing popularity of central heating appliances, this source of pollution by smoke should gradually diminish.

The Beaver Committee on Air Pollution recommended that we should seek first to clear smoke and dirt from the atmosphere. Their recommendation is still unchallengeable, although admittedly the problem of pollution by sulphur dioxide remains.

Mortuary Accommodation

The Epsom District Hospital provides adequate mortuary and post-mortem facilities to meet the requirements of the Borough. The Council mortuary with post-mortem room and refrigeration was not used during the year but is suitably maintained in case of emergency.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES

Notifiable Infectious Diseases

Table I includes death rates and incidence rates of the notifiable infectious diseases, with the figures for the previous year for comparison. Table IV shows the number of cases of infectious diseases notified during 1965. Table V shows the incidence of notifiable infectious diseases classified according to age and sex, with the exception of tuberculosis which is dealt with in Tables VI and VII.

Smallpox

No cases reported during the year.

Vaccination against Smallpox

Vaccination is available through the family doctor and at clinics throughout the Borough. During the year 587 vaccinations were notified representing 549 primary and 38 re-vaccinations. Family doctors carried out 144 vaccinations and 443 were done at clinics. At the end of 1965, 520 infants up to the age of two years had been vaccinated, representing an acceptance rate of approximately 56 per cent. This low acceptance rate for the primary vaccination of infants is disturbing.

Although Smallpox (*Variola Major*) is practically absent from this country, we are never free from the risk of imported infection, particularly these days of increasing air travel. When a case of Smallpox occurs in this Country, the isolation and surveillance of contacts and their vaccination is the most important control measure. This last procedure is much more effective and has fewer risks when it is re-vaccination. The Health Visitor, through her close association with the infant and his parents, might do more to encourage a higher acceptance rate of primary vaccination at an early age when the risks are negligible.

Diphtheria

It is gratifying to record that no case has been notified in the Borough since 1954 but this does not mean that we must adopt a complacent or apathetic attitude towards the need to maintain a high acceptance rate for protective inoculation against this lethal disease.

Primary Inoculation	Carried out by General Practitioners	Carried out at Schools and Clinics
Triple (Diphtheria, Whooping Cough and Tetanus) .	143	613
Combined (Diphtheria and Tetanus)	1	2
Tetanus only	46	93
<i>Reinforcing Inoculations</i>		
Triple	136	456
Combined (Diphtheria and Tetanus)	50	925
Tetanus	29	10

Acute Poliomyelitis

No cases of paralytic poliomyelitis have been reported in the Borough for the past five years. The live attenuated vaccine given by mouth has proved effective in controlling the spread of this dreaded disease. The vaccine is given to children during the first year of life with a reinforcing dose at the age of school entry and is also available to persons in certain priority groups including expectant mothers, members of the Health, Hospital, Nursing and Ambulance Services, and to travellers proceeding to countries other than Europe, Canada and U.S.A. The vaccine—three drops on a lump of sugar or in a spoonful of syrup is certainly popular with youngsters and leads to a high acceptance rate.

“A spoonful of sugar
Makes the medicine go down.”

Primary immunising procedure was carried out in 861 persons under 16 years of age and in 58 persons aged 16 years and over ; 845 persons received reinforcing doses.

Typhoid Fever

Only one case was notified—man aged 25 years.

The diagnosis was made on the results of serological examinations, the illness was mild and of short duration. The causal organism was not identified.

Paratyphoid Fever

No cases were reported during the year.

Food Poisoning

Thirteen cases of food poisoning were reported, giving an incidence rate of 0.18 per 1,000 population, compared with 23 cases in 1964. From seven cases *S. typhi-murium* was recovered, *S. enteritidis* from two cases, *S. san diego* from one, *S. stanley* from one and *S. brandenburg* from one.

Dysentery

There were 20 notifications of the Sonne-type dysentery compared with 51 in 1964.

Scarlet Fever

During recent years scarlet fever has been a mild disease with few serious complications. 32 cases were notified compared with 28 in 1964. The incidence rate per 1,000 population was 0.47.

Measles

In this country, measles occurs in epidemic form every second year. As expected the epidemic was a relatively mild one and 825 notifications were received compared with 131 in 1964. Complications such as broncho-pneumonia are uncommon after the age of two years hence the value of immunisation in very early life. Early in 1966 the Ministry of Health, reporting on a protection trial carried out by the Medical Research Council in children between the ages of 10 months and 2 years, advised that the use of the new measles vaccines should give a high degree of immunity in this age group. Vaccines are now available through the National Health Service to doctors who wish to use them for any of their patients. The Ministry have advised that further studies are needed before advice can be offered on the use of these vaccines in the routine immunisation of children or on measles vaccination campaigns.

Whooping Cough

Due largely to the protective inoculation now widely accepted by parents for their children, whooping cough is now a mild disease with few complications. 13 cases of whooping cough were notified, compared with 41 in 1964.

Tuberculosis

Register of Tuberculous Persons

During the year the names of 44 persons were added to the tuberculosis register, and 59 were removed. Details of these alterations are as follows :-

Additions to Register

Primary notifications relating to private residents already residing in this district	10
Primary notifications of persons residing in institutions :	
(a) Already resident	3
(b) On admission	2
Transfer of private residents notified in other areas, now residing in this district	17
Transfer of persons notified in other areas now residing in institutions in this district	11
Reinstated	1
	<hr/>
	44
	<hr/>

Removals from Register

By removals to other districts :	
(a) Private residents	17
(b) Patients in mental institutions	2
By recovery :	
(a) Private residents	27
(b) Patients in mental institutions	Nil
By death :	
(a) Private residents	6
(b) Patients in mental institutions	7
	<hr/>
	59
	<hr/>

Of the 13 names removed from the register because of death only one was certified as due to tuberculosis.

At the end of the year the number of names on the register totalled 344 distributed as follows :

	<i>Respiratory</i>		<i>Non-Respiratory</i>	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
In private residences	135	85	8	21
In institutions	78	11	4	2
	<hr/>	<hr/>	<hr/>	<hr/>
	213	96	12	23
	<hr/>	<hr/>	<hr/>	<hr/>

Notifications of Tuberculosis

Fifteen notifications were received from medical practitioners of persons certified, so far as is known for the first time, to be suffering from tuberculosis. In Table VI these cases are classified by sex and age and sub-divided into pulmonary and non-pulmonary types of disease. In Table VII the number of notifications received in previous years is given for purposes of comparison.

Extra Nourishment

Provision of special nourishment in the form of milk was granted to 20 selected cases for varying periods during the year and 11 cases were in receipt of extra nourishment at the end of the year.

B.C.G. Vaccination against Tuberculosis

This protection is available at Chest Clinics to close contacts who are Mantoux negative and to children who are approaching school leaving age. Consent Forms were sent to parents of school leavers. There was a high acceptance rate and the results are shown below :

Number of children offered treatment	775
Number consenting	634 (equivalent to 81.8%)
Number Mantoux positive	21 (equivalent to 3.3%)
Number of children vaccinated	596 (equivalent to 76.9%)

87 pupils of Epsom College were given B.C.G. vaccination and 18 children who missed vaccination in previous years.

Mass Radiography Service

One hundred and sixty pupils and staff were examined when the Mass Radiography Service visited Epsom College in 1965. No case of active pulmonary tuberculosis was detected. It is expected that the Service will visit the Borough in 1966.

Public Health Laboratory Service

Bacteriological investigations were carried out by the Public Health Laboratory, West Park Hospital, Epsom, under the direction of Dr. D. R. Gamble, to whom grateful acknowledgement is made. Specimens may be submitted by doctors, veterinarians, dentists, persons acting on behalf of medical officers of health, such as health inspectors and health visitors, or by representatives of official bodies. Specimens cannot be accepted from private persons. The routine specimens examined fall under two main headings :-

- (a) medical specimens.
- (b) sanitary specimens from local or food authorities or, by arrangement, from commercial undertakings.

SERVICES UNDER THE FOOD AND DRUGS ACT, 1955

(a) Milk Supplies

Practically the whole of the milk distributed within the Borough was heat-treated. A small amount of raw (farm-bottled) milk (6,000 pints) from two producers in Surrey and Sussex was sold by one registered distributor.

The Epsom Public Health Laboratory reported favourably on 108 samples of heat-treated milk and five samples of untreated milk (bottled).

	<i>Methylene Blue Reduction Test</i>	<i>Phosphatase Test</i>	<i>Turbidity Test</i>
	SATISFACTORY	SATISFACTORY	SATISFACTORY
Untreated 5	5	—	—
Pasteurised 100	100	100	—
Sterilised 7	—	—	7
Separated 1	1	—	—

The phosphatase test measures the efficiency of pasteurisation, the methylene blue reduction test indicates keeping quality and cleanliness, and the turbidity test provides an efficient check on sterilisation.

For the first eight months of the year, the South West Metropolitan Regional Hospital Board had two dairy farms at Long Grove and Horton Hospitals with a daily output of upwards of 300 gallons. 100 gallons raw milk were supplied in bulk daily to three local hospital kitchens and 200 gallons daily were sent to the Milk Marketing Board for treatment at a pasteurising plant in Streatham. At the beginning of September, all the cows in milk were sold off the farms and milk production ceased. Eight samples of raw bulk milk from each of Long Grove and Horton Farms were submitted to Epsom Public Health Laboratory and none showed any evidence of *Brucella Abortus* or of *Tubercle Bacilli* after animal inoculation.

(b) Ice Cream

The bulk of ice-cream sold in the Borough was manufactured outside the District principally by firms of national repute. The sale of soft ice cream prepared in the Borough gave rise to some anxiety.

During the year 137 samples of ice cream were submitted to the Public Health Laboratory for bacteriological examination by the methylene blue reduction test. Results were as under :-

Grade I	79
Grade II	22
Grade III	22
Grade IV	14
	<hr/>
	137

Grades I and II may be regarded as satisfactory.

Eighteen of the unsatisfactory samples came from an ice-cream factory within the Borough. Sampling at different stages of manufacture and sampling from a cold storage vat three days after the date of manufacture showed that the cooling equipment was inadequate and that there had been a lack of thorough cleansing of the equipment.

Sampling from one vendor whose product was reconstituted from a bacteriologically safe heat-treated mix indicated a lack of adequate cleansing. The Health Inspectors were diligent in demonstrating to the local manufacturer and the vendor efficient methods of sterilisation of equipment.

(c) Liquid Egg (Pasteurisation) Regulations 1963

There are no egg pasteurisation plants within the Borough.

(d) Food Hygiene (General) Regulations 1960

The Ministry ask for definite information about the provision of wash-hand basins as distinct from sinks on premises where open food and equipment are washed. Hand washing should be carried out in the wash-hand basin provided for this purpose and *not* at the sink where open food and equipment are cleansed. Hence the importance of the provision of separate wash-hand basins. Details are required of food premises subject to the above Regulations and grouped in categories of trade carried on in them with information for each category separately concerning Regulation 16 (wash-hand basins) and Regulation 19 (provision of sinks for washing food and equipment). I am indebted to the Chief Public Health Inspector for the information given in the table below. It is interesting to note that in a total of 407 premises all complied with Regulation 16 and in a total of 406 premises, all complied with Regulation 19.

Inspection and Supervision of Food

The extensive field covered by the work of the Health Inspectors is detailed in the Report by the Chief Public Health Inspector.

Inspection under the Factories Act, 1961

Within the Borough, the Public Health Inspectors carried out 143 inspections on 138 registered premises and six written notices were served. Of the 20 defects found, eight were due to lack of cleanliness and the others mainly to lack of hot water supply and to minor structural faults. All defects were remedied.

Food premises grouped in categories of trade carried on in them including the following information.

<i>Category</i>	<i>No. of Premises</i>	<i>No. of premises complying with Regulation 16 (wash-hand basins)</i>	<i>Premises to which Regulation 19 applies. Facilities for washing food and equipment</i>	<i>Premises complying with Regulation 19</i>
Bakehouses and Bakers' Shops	19	19	19	19
Butchers	28	28	28	28
Cafes	32	32	32	32
Clubs	9	9	9	9
Confectioners	71	71	71	71
Dairies and Milk Depots. . .	3	3	3	3
Fishmongers and Fried Fish Shops	17	17	17	17
Greengrocers (Wholesale and Retail)	35	35	35	35
Grocers (Wholesale and Retail)	74	74	73	73
Kitchens :-				
Factory	7	7	7	7
Hotel	8	8	8	8
Hospital & Nursing Home	11	11	11	11
School—Council	18	18	18	18
School—Private	9	9	9	9
Multiple Food Stores (Supermarkets)	8	8	8	8
Public Houses and Off-Licences	58	58	58	58
Total	407	407	406	406

TABLE IV

NOTIFICATION OF INFECTIOUS DISEASES

	<i>Notifications of Diseases occurring in Private Houses</i>	<i>Notifications of Diseases occurring in Hospital</i>	<i>Total</i>
Typhoid	1	—	1
Paratyphoid	—	—	—
Meningococcal Infections	—	—	—
Scarlet Fever	32	—	32
Whooping Cough	13	—	13
Diphtheria	—	—	—
Erysipelas	3	—	3
Smallpox	—	—	—
Measles	825	—	825
Pneumonia	10	—	10
Poliomyelitis : Paralytic	—	—	—
Non-Paralytic	—	—	—
Food Poisoning	13	—	13
Dysentery	11	9	20
Malaria : contracted abroad	—	—	—
indigenous	—	—	—
Tuberculosis : Respiratory	9	3	12
Non-Respiratory	1	2	3
Puerperal Pyrexia	1	—	1

[See over for Table V]

TABLE VI

NOTIFICATION OF TUBERCULOSIS BY AGE AND SEX

<i>Year</i>	<i>Private Residents</i>				<i>Mental Hospital Patients</i>				<i>Total</i>	
	<i>Pulmonary</i> <i>M</i>	<i>Pulmonary</i> <i>F</i>	<i>Non-Pulmonary</i> <i>M</i>	<i>Non-Pulmonary</i> <i>F</i>	<i>Pulmonary</i> <i>M</i>	<i>Pulmonary</i> <i>F</i>	<i>Non-Pulmonary</i> <i>M</i>	<i>Non-Pulmonary</i> <i>F</i>	<i>M</i>	<i>F</i>
Under 1 year	—	—	—	—	—	—	—	—	—	—
1 - 4	—	1	—	—	—	—	—	—	—	1
5 - 9	—	—	—	—	—	—	—	—	—	—
10 - 14	—	—	—	—	—	—	—	—	—	—
15 - 19	—	—	—	—	—	—	1	—	1	—
20 - 24	1	—	—	—	—	—	—	—	1	—
25 - 34	—	2	—	—	—	1	—	—	—	3
35 - 44	—	1	—	—	—	—	—	—	—	1
45 - 54	1	—	—	—	1	—	—	—	2	—
55 - 64	1	—	—	—	—	—	1	—	2	—
65 and over	1	1	—	1	1	—	—	—	2	2
Total	4	5	—	1	2	1	2	—	8	7

TABLE V

NOTIFICATION OF INFECTIOUS DISEASES BY AGE AND SEX
(FOR TUBERCULOSIS SEE TABLE VI)

	Under 1 year		1 - 2		3 - 4		5 - 9		10 - 14		15 - 24		25 - 44		45 - 64		65 years and over		All Ages		Total all ages both sexes
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	1
Paratyphoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infections	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	—	—	—	—	4	4	11	9	—	2	—	—	2	—	—	—	—	—	17	15	32
Whooping Cough	—	2	—	2	3	1	2	2	—	1	—	—	—	—	—	—	—	—	5	8	13
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	1	1	2	3
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	13	10	92	81	135	138	169	164	7	8	2	4	1	1	—	—	—	—	419	406	825
Pneumonia	—	—	—	—	—	1	—	1	—	1	1	—	1	—	1	—	3	1	6	4	10
Poliomyelitis : Paralytic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Non-paralytic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	—	—	1	—	1	—	—	—	—	1	1	3	2	1	1	2	—	—	6	7	13
Dysentery	—	—	2	1	1	3	2	3	—	—	3	—	2	—	3	—	—	—	13	7	20
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	1

TABLE VII

TUBERCULOSIS INCIDENCE AND MORTALITY RATES 1934-1965
(QUINQUENNIAL AVERAGES 1934-1964)

<i>Year</i>	<i>Primary Notifications</i>	<i>Notification Rate per 1,000 Population</i>	<i>Deaths</i>	<i>Death Rate per 1,000 Population</i>
1934 - 1938	44	0.78	18	0.35
1939 - 1943	67	1.11	33	0.52
1944 - 1948	75	1.15	26	0.36
1949 - 1953	66	0.96	19	0.28
1954 - 1958	53	0.78	14	0.20
1959 - 1963	34 (16)	0.49	4 (2)	0.05
1964	41 (15)	0.57	3 (—)	0.04
1965	15 (5)	0.21	1 (—)	0.01

Figures relating to patients in mental hospital situated in the district are included in the total. They are also shown separately in the bracketed figures

PART TWO

PERSONAL

HEALTH

SERVICES

PERSONAL HEALTH SERVICES

Ante-Natal Care

Ante-natal sessions are held at the Health Clinics in Ewell and Epsom. At Ewell a weekly session is conducted by a Consultant Obstetrician from Epsom District Hospital assisted by a Medical Officer of the Borough Council. The Midwives hold a session twice weekly at Ewell Clinic and one a week at Epsom Clinic.

Details of attendances at these sessions are given below :-

<i>Clinic</i>	<i>Sessions held by</i>	<i>Number of Women who attended during the year</i>	<i>Total Number of attendances during year</i>
Ewell	Obstetrician and Medical Officer .	251	1,255
Ewell	Midwives	241	1,586
Epsom	Midwives	121	478

In addition 86 women attended at Ewell Clinic for post-natal examination.

Health Education

Expectant mothers attended as under at Ewell Clinic for Mothercraft (Health Visitors) and Relaxation Exercises (Physiotherapist).

<i>Number of women who attended</i>	<i>Number of new cases</i>	<i>Total attendances</i>	<i>Sessions per month</i>
117	108	522	4

The combined Mothercraft and Relaxation Exercises Classes have now been extended to the new clinic in Church Street, Epsom.

Analysis of Notified Births

	<i>Live Births</i>	<i>Still Births</i>	<i>Total</i>
Born at Home (Local Authority Midwives)	231	1	232
Born in Hospitals	694	9	703
Born in Nursing Homes	4	—	4
Total	929	10	939

Prematurity (i.e. babies weighing 5½lbs. or less at birth)

Equipment is provided by this Department for the care of premature infants born at home and adequate provision is available in hospital.

(a) Number of premature infants notified.

<i>Place of birth</i>	<i>Live Births</i>	<i>Still Births</i>
Own home	8	—
Maternity Homes	—	—
Hospital	29	3
	37	3

(b) Deaths of premature infants within 28 days

In Hospital	4
At home	—
	4

Congenital Malformations

Since the publication of Ministry of Health Circular 13/63 Local Health Authorities are required to report to the Registrar General all congenital malformations noted at birth.

During the year there were five notifications classified as follows :—

Limbs	2
Alimentary system	1
Heart	1
Urogenital system	1

This represents a frequency of 0.5 per cent. of total births.

Unmarried Mothers

Under the Authority's scheme for the welfare of unmarried mothers and their children full use was made of the Epsom Deanery Association Social Workers. During the year 23 girls were admitted to Voluntary Homes and to the Surrey County Council Home at Dorincourt, Woking.

The ages of the unmarried mothers ranged from 15 to 28 years. Nine girls kept their babies and 14 babies are awaiting adoption or have been adopted.

Child Welfare Clinics

These were held in the afternoons at :—

*Average attendance
per session*

Ewell Court :—	
Mondays, Wednesdays and Thursdays	75
Church Hall, Dell Lane, Stoneleigh :—	
Tuesdays	43
Church Hall, Northey Avenue, Ewell :—	
Wednesdays	21
Church Street, Epsom :—	
Mondays and Wednesdays	67
Wells Social Centre, Epsom :—	
1st, 3rd and 5th Tuesdays	29
Church Hall, Rosebery Road, Epsom Downs :—	
2nd and 4th Tuesdays	26

Clinic Attendance

Clinic	Number of children attending clinics born in			
	1965	1964	1960-63	Total
Ewell Court	412	414	912	1,738
Dell Lane	78	89	191	358
Northey Avenue	41	39	162	242
Epsom	240	252	370	862
Wells House	31	18	62	111
Epsom Downs	25	18	60	103
Total	827	830	1,757	3,414

Welfare Foods

National dried milk, orange juice, cod liver oil and vitamin tablets are obtainable during clinic sessions for the use of expectant and nursing mothers, children up to the age of five years and handicapped children. In addition a large variety of proprietary foods are on sale at all clinics at reduced prices. This service is run by voluntary helpers.

REPORT OF THE SENIOR DENTAL SURGEON

Dental Care of Mothers and Young Children

The Health Visitors, with their unrivalled opportunities of advising and instructing mothers in their own homes and at the Ante-Natal Clinics, have emphasised the importance of the dental health of the mother and of the child. Every encouragement is given to parents to take their children for regular dental inspection before the age of three.

The ensuing details illustrate some of the treatment provided for mothers and young children during the year. Some 47 mothers were inspected at the Clinics and of these 42 received treatment ; 59 fillings were inserted and 39 teeth extracted ; 10 dentures were provided. Among pre-school children, 201 were inspected ; these included children of a nursery class at West Ewell Infants' School, the Wells House Residential Nursery and Waltham House Day Nursery. Some 79 children received treatment, which included the completion of 260 fillings and the extraction of 63 temporary teeth.

Summary of Treatment

(a) Number provided with dental care

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	47	43	42	31
Children under 5 years	201	83	79	52

(b) Forms of dental treatment provided

	Scaling and Gum Treatment	Fillings	Silver Nitrate Treatment	Extractions	General Anaesthetics	Dentures Provided		X-rays
						Full	Partial	
Expectant and Nursing Mothers	21	59	1	39	10	3	7	1
Children under 5 years	—	206	10	63	34	—	—	—

(c) Two Dental Treatment Centres were in use for services shown in (b) and the equivalent of 49 Dental Officer Sessions were devoted to Maternity and Child Welfare patients during the year.

(d) Attendance for dental inspection and treatment

Expectant and Nursing Mothers	129
Children under 5 years	258

Survey of Diet and Dental Caries in Young Children

The Society of Medical Officers of Health, on the recommendation of the Dental and Research Groups and in collaboration with the Dental Staff of Liverpool University asked for co-operation in a project designed to investigate regional differences in the feeding habits of young children which may cause gross destruction of the teeth at an early age. A small pilot study had been undertaken in a County and in a County Borough to test a suggested method of carrying out such a survey and it had been found that it could be satisfactorily performed by Health Visitors who were asked to record only gross visible caries in upper and lower incisors.

The Health Visitors in this Borough were accordingly asked to assist in this survey by the completion of questionnaires and inspection of teeth of 24 children. The names of these children, all over one year but not yet three, were obtained from the birth register by random selection. The condition of the teeth of the children examined was invariably good for no decayed or missing incisors were reported.

Fluoridation of the Public Water Supplies

The Council gave careful consideration to the Ministry's Circulars 28/62, 12/63 and 15/65 on the subject of fluoridation and were opposed to the adding of fluoride to public water supplies in the Borough.

Phenylketonuria

At the age of three weeks, all infants have a urine test for this disease which, untreated, leads to grave mental deficiency. In this condition there is a specific enzyme deficiency which results in the accumulation of a toxic substance in the blood which would normally be rendered non-toxic by the enzyme. We can circumvent the effects by giving a diet low in the toxic substance.

In 1965 Health Visitors carried out 1,017 such tests in the Borough and no cases of phenylketonuria were discovered.

Audiological Service

The mothers of all children born in the area are invited to take their babies to a clinic for a screening test for hearing. The test is carried out by Health Visitors when the children are aged approximately seven months. Where there is any doubt the child is referred for examination by a Medical Officer of the County Audiological Service. The Medical Officer of the Local Authority carries out a further screening test of children in the "at risk" group at the age of 2½ years. During the year 721 children had screening tests for hearing and 20 were referred to the County Audiologist. It is of vital importance that the child suffering from a severe degree of deafness should be



EWELL COURT HEALTH CLINIC



PREPARATION FOR GROWING-UP AT THE
EWELL TRAINING CENTRE



HEALTH EDUCATION BEGINS EARLY
AT EWELL COURT CLINIC

diagnosed before his first birthday. If he can be given help at this early stage (i.e. when the teacher can get the maximum response) it is easier for him to use his residual hearing, to learn to watch for speech, to understand a few simple commands and to develop speech and language. It is more difficult to help the severely deaf child if the handicap is not ascertained till the age of two years by which time he has passed the most receptive stage.

Recuperative Holidays

Holidays are arranged for patients who have been ill in their own homes or in hospital and who require a period of recuperation without nursing or medical care.

Particulars of cases dealt with during the year are as follows :-

	<i>Recommended by Hospital Departments</i>	<i>Recommended by General Practitioners</i>	<i>Total</i>
Number of patients	13	5	18

Medical Arrangements for Long-Stay Immigrants

In the early part of the year two communications were received from the Ministry of Health who are concerned with the special problems which arise in connection with health and welfare of long-stay immigrants. At first the immigrant may live under difficult conditions and he may have been exposed to the risk of Tuberculosis in his country of origin. We have been asked to ensure that on arrival he is informed how to use our Health Services and that he is advised to register himself and his dependants with a General Practitioner. Where deemed advisable, he is referred for Chest X-ray. Local Authorities now receive notifications from Port Health Authorities of the arrival of all long-stay immigrants. Those who take resident jobs in our local hospitals within the Borough receive a medical examination, X-ray of chest and where necessary B.C.G. Vaccination. Other immigrants are visited by our Health Visitors and told how to use the Health Services and are offered an appointment to attend Epsom Chest Clinic for X-ray and B.C.G. Vaccination.

During the year we confirmed that 71 immigrants had taken up resident posts in our local hospitals. Health Visitors called on 44 other immigrants, advised them on how to make the best use of our Health Services and gave each an appointment to attend the Epsom Chest Clinic for X-ray and skin test.

Only one case of active pulmonary tuberculosis was notified and that in a French immigrant who returned to her own country for treatment.

One male immigrant suffering from quiescent pulmonary tuberculosis re-entered the country in March 1965 and is now under the supervision of the Epsom Chest Clinic.

Midwifery Service

One midwife attended a Refresher Course at Nottingham University and the Borough Nursing Officer attended a Midwifery Course at Bangor University.

The proportion of domiciliary confinements in 1965 was as follows :-

<i>Total Births Live and Still</i>	<i>Domiciliary Confinements</i>	<i>Percentage of Domiciliary Confinements</i>
943	233	25.00

Details of the work of the domiciliary midwives in 1965 are as follows :-

<i>Confinements</i>	
(a) Doctor booked	228
(b) Doctor not booked	5
(c) Miscarriages	7
<i>Number of visits paid by Midwives</i>	
Ante-natal visits	991
Visits during labour/puerperium/post-natal	3,800
Visits to cases discharged from hospitals before end of 10th day	733

The Ministry of Health have recommended Hospital Authorities to provide lying-in beds for 70 per cent. of confinements. The rising birth rate makes the present shortage of maternity and ante-natal beds more acute and results in some early discharges (48 hours after delivery). But the practice of early discharge is unpopular both with the Hospital Midwife and her colleague on the District. The former, although she has brought the baby into the world and cared for the mother, is denied the opportunity of observing the progress of mother and baby for the normal 10-day period. The District Midwife has missed the really interesting part of the confinement

and naturally she feels disappointed. This practice certainly has an adverse effect on the recruitment of midwives. When the expectant mother first attends the Hospital Ante-Natal Clinic, the Obstetrician will base his decision whether she is to be booked for hospital confinement :-

- (a) on her medical history.
- (b) on home conditions as reported by the domiciliary midwife.

If she is considered suitable for "early discharge" the Borough Nursing Officer ensures that a District Midwife will accept the care of the mother and infant during the remainder of the lying-in period while the Home Help Supervisor makes the necessary arrangements for domestic help.

Home Nursing

The establishment for District Nurse/Midwives is 15 and at the end of the year the equivalent of 13.5 were employed. In addition the Council employ a part-time Nursing Auxiliary.

Four District Nurses attended Refresher Courses—two at Glyn House, one at Exeter University and one at Leeds University.

Particulars of Patients Nursed

Age Group	Number of Patients	Number of Visits
Under 5 years	1	19
Between 5 and 64 years	251	9,501
65 years and over	654	19,885

It is interesting to note that three-quarters of the District Nurses' time is spent on the domiciliary care of people over 65 years. As more and more people come into this age group so an increasing proportion of their time must be devoted to the care of the elderly.

Incontinence Pads

The introduction of the incontinence pads service established since 1963 has eased the burden of nursing. No charge is made where there is a recommendation from medical practitioners or from members of the Borough Nursing Staff. During the year patients not under the care of the District Nurses were supplied with these pads on medical recommendation and the District Nurses received 2,000 pads for 51 incontinent patients.

Disposal of soiled pads. In homes where there is an open fire or a solid fuel boiler disposal is easy. Where no facilities exist for burning, the soiled pads are placed in specially made waterproof paper bags supplied by the Public Health Department which arranges for collection and disposal by incineration.

Epsom Day Nursery, Waltham House—50 places

The staff at the Day Nursery, excluding domestic staff, consist of matron, deputy matron, five nursery nurses, one nursery assistant and four students.

The average daily attendances each month during 1965 were :-

Month	Children Aged		Total Average Daily Attendances
	0 - 2	2 - 5	
January	8.4	23.3	31.7
February	10.4	23.4	33.8
March	10.4	20.0	30.4
April	9.1	22.6	31.7
May	13.3	32.6	45.9
June	13.9	31.5	45.4
July	13.5	33.3	46.8
August	13.1	27.0	40.1
September	10.8	28.2	39.0
October	11.8	34.7	46.5
November	11.9	32.9	44.8
December	15.0	30.2	45.2

The average daily attendance for the year was 40.2.

Nurseries and Child Minders Regulation Act, 1948

Under this Act, the Council are responsible for the registration and supervision of day nurseries and of persons who receive children into their homes by day for financial gain. During the year three nursery premises and four child-minders were registered. At the end of the year the number of nursery premises and daily minders registered was as under :—

	<i>Number Registered as at 31.12.65</i>	<i>Number of Children looked after</i>
Nursery Premises	9	250
Child-Minders	9	73

Nursing Homes Act and Regulations, 1963

The Nursing Homes Act 1963 and the relevant regulations provide for adequate and competent staffing, adequate space, furnishing and nursing equipment together with sufficient sanitary and washing facilities, light, heating and ventilation. There are two registered Nursing Homes in the Borough providing a total of 44 beds for geriatric patients. These Homes were visited by the Medical Officer of Health and the Borough Nursing Officer and reported to be satisfactory.

National Assistance Act 1948

National Assistance (Amendment) Act 1951

Under Section 47 of the 1948 Act power is given to the Councils of County Boroughs and County Districts to apply to a Court of Summary Jurisdiction for an order for removal and detention in a suitable hospital or other place :—

of persons who are suffering from grave chronic diseases, or being aged, infirm or physically incapacitated are living in insanitary conditions, and

of persons who are unable to devote to themselves, and are not receiving from other persons, proper care and attention.

During the year only one case was dealt with under this Act—an old man of 83 years who was removed to Epsom District Hospital and remained voluntarily after expiry of the Order. He was later transferred to a registered Old People's Home where he has settled down very happily.

Ambulance Facilities

The public ambulance service is under the control of the Surrey County Council and the main ambulance control station is situated at Walton Lodge, Banstead (telephone Mogador 2991). During the year a new sub-station was opened in Church Street, Epsom, which replaced the sub-station in Langton Avenue, Ewell.

In accidents in the home or elsewhere or in case of sudden illness in streets or public places, any responsible person may call an ambulance, telephone 999.

Where there is doubt about the maternity patient's fitness for the journey, the decision must be made by the doctor in charge or by a certificated midwife who should accompany the patient in the ambulance to hospital. The removal of cases of illness or accident will be arranged by the hospital concerned, or by the medical practitioner in charge of the patient.

Family Planning

Within recent years there has been a change in the climate of opinion on Family Planning and now the Ministry of Health recommend Local Authorities to undertake general education in Family Planning and to give all help and encouragement to the Family Planning Association and to similar voluntary bodies who seek to advise and to prescribe for those who wisely desire to achieve planned parenthood. The Ministry's ruling is that the decision to offer advice on family planning must not depend on any specific danger to health incurred by further pregnancy. The Local Authority may make Family Planning arrangements either directly in their own Clinics or indirectly through voluntary bodies.

The Council have decided to provide Family Planning Service throughout the local branch of the Family Planning Association who conduct sessions at :—

Epsom District Hospital	twice a week
Epsom Health Clinic	once a week
Ewell Court Health Clinic	once a week

Accommodation and clinic facilities are provided free of charge to the Family Planning Association.

If a patient is referred by a Borough Council Medical Officer to a Family Planning Clinic because further pregnancy would be detrimental to health, the Council pay for the treatment (including supplies).

Venereal Disease

The recent increase in Venereal Disease has been halted. To control the spread of fresh infection and to direct the patient to treatment information is given by press and poster of places and times where Clinics are held. Evening Clinics were available for both sexes at St. Helier Hospital, Sutton. Below are given particulars of new cases.

	Syphilis		Gonorrhoea		Other Conditions	
	Male	Female	Male	Female	Male*	Female*
Epsom and Ewell .	1	2	3	—	18	16

**The majority of these conditions are not venereal*

Health Visitor Service

The establishment of Health Visitors for the Borough is 10 :—

5 based at Ewell Court Clinic

3 based at Epsom Clinic

1 geriatric Health Visitor attached to group practices of general practitioners

1 tuberculosis Health Visitor attached to the Chest Department at Epsom District Hospital.

The average case load of families per Health Visitor was 361.

Total number of children visited by Health Visitors during the year :—

Born in 1965	Born in 1964	Born in 1960-63	Total
942	986	2,432	4,360

Clinic Attendances made by Health Visitors

(a) Child Welfare Sessions	497
(b) Immunisation and Vaccination Sessions	20
(c) Health Education (including Mothercraft)	50
(d) Geriatric Sessions	128

The tuberculosis Health Visitor is responsible for the community care of tuberculous patients and reports on the home conditions of each. At the end of the year 286 patients were under her care.

Chiropody

Chiropody was available throughout the year to elderly persons, physically handicapped (including the blind and partially sighted) and expectant mothers.

1. By approved Chiropodists in their own Surgeries.
2. Under a scheme operated by the Old People's Welfare Committee and subsidised by the Borough Council. This scheme ended on 1st September, 1965.
3. By a full-time Chiropodist employed by the Council who took up her appointment on 31st May.

In every case the maximum charge is 3s. 0d. for treatment.

The Council make no charge for this service to any person who is in receipt of National Assistance, or whose means are so limited that to pay such a charge, would be likely to render him eligible to receive National Assistance.

Domiciliary treatment is provided for any person who is physically unable to make the journey. This chiropody service, a much appreciated and rapidly expanding one, helps to keep the old person ambulant. Provision has been made in the Council's current year's estimates for the employment of an additional half-time chiropodist.

Details of treatment given during the year are shown in the Tables below :—

1. *Old People's Welfare (1.1.65 to 31.8.65)*

Number of treatments given in Surgeries	2,826
Number of treatments given at homes of patients	773
2. *In the Surgeries of Chiropodists approved by the Council*

Numbers under treatment at 31.12.65	759
Number of treatments given in surgeries	2,579
Number of treatments given at homes of patients	938
3. *Whole-time Council Chiropodist*

Number under treatment at 31.12.65	386
Number of treatments given at Clinics and Old People's Homes	974
Number of domiciliary treatments	495

Home Help Service

In this country at the beginning of the century only one in 22 of the population was over the age of 65, now the proportion is one in eight, in other words the dependent section of the population is increasing at the expense of the productive section. The trend of our modern society is directed towards urging more and more women to accept paid employment outside the home. As a result of this the old are going to feel more isolated and lonely for their dependency is social and physical as well as economic. The Home Help can and does play an important role not only with domestic duties but by her presence she gives moral support and relieves loneliness. Although nearly 80 per cent. of the hours of service given by the Helps last year was in support of the elderly and infirm, this service was inadequate. The Neighbourly Help Scheme in operation since 1961 has done a little to make up for this shortage in certain areas but we need far more "Good Neighbours" prepared to give regular daily service and friendly supervision. For this service the neighbour is paid up to £3. 5s. 0d. per week according to the amount of time she can give. During the last year 14 elderly people living alone benefited by this scheme.

The establishment for the Borough is the equivalent of 21 full-time Home Helps.

Helps employed at the end of the year :-

Whole-time Home Helps employed	3
Part-time Home Helps employed	30
Equivalent full-time Home Helps	17.28

The number of cases assisted during the year was :-

Aged 65 years and over	242
Chronic sick and tuberculous	63
Mentally disordered	3
Maternity	151
Others	50
Total	509
Average hours of help given per case	52

Welfare Services Provided Under the National Assistance Act, 1948

(a) Blind and Partially Sighted Persons

The registration of blind persons is not a statutory requirement but blind and partially sighted persons are encouraged to accept registration in order to qualify for the welfare benefits specially provided. In addition to 76 blind persons in Epsom Hospitals there were at the end of the year 181 registered blind persons and 25 partially sighted persons in the community, including 66 blind persons in Swail House. All blind persons are visited by a full-time Home Teacher who works in close touch with the Surrey Voluntary Association for the Blind who have a wide range of supporting services including aids, wireless sets, travel concessions, holiday grants, Braille and Moon literature and talking book machines. The Home Teacher helped by voluntary workers conducts a handiwork class one afternoon a week at Christchurch Hall.

Incidence of Blindness

Number registered as blind 1st April to 31st December, 1965	16
Number registered as partially sighted 1st April to 31st December, 1965	3

Registration of Blind

Blind persons on Register at 1st April, 1965	178
Number registered from 1st April to 31st December, 1965	16
Number transferred in from other areas	5
Number re-certified	1
	<hr/> 22
	200
Number who died during period 1st April to 31st December, 1965	8
Number transferred to other areas	9
Number de-certified	2
	<hr/> 19
	<hr/> 181

Age groups of blind persons as at 31st December, 1965

	Male	Female	Total
Under 5	—	—	—
Aged 5-15	1	—	1
Aged 15-30	3	1	4
Aged 30-50	4	3	7
Aged 50-70	16	45	61
Aged 70 and over	25	83	108
	49	132	181

At 31st December, 1965, there were 66 blind persons in Swail House.

Swail House is administered by the London Association for the Blind, but the blind persons are visited and helped by the Borough Home Teacher for the Blind.

There were 76 "C" cases—these are Blind Persons in Hospital and Homes in this area who are on the registers of other authorities but visited by our Home Teacher for the Blind.

There was one blind Home Worker—employed as a chair seater—whose earnings were augmented by the Local Authority.

No blind persons were employed in sheltered workshops.

Partially Sighted

Number of partially sighted on register at 31st December, 1965 :—

Male	8
Female	17
Total	25

(b) Deaf and Hard of Hearing Persons

One trained Social Worker is employed for six sessions weekly. She visits adults in hospital and in the community and is in close touch with the parents of deaf and partially deaf pupils of school age. Her work is mainly with deaf persons over the age of 16 years, some of whom are dumb and some have speech. In her domiciliary visits she discusses problems of daily living such as employment, the upbringing of children, etc. She assists in placing deaf men and women in suitable employment and maintains regular contact with them. Because of language difficulties they may need her help in problems associated with employment, income tax, national health insurance and any other matters which may not be readily understood. An interesting part of her work is the interpretation of any information which the deaf person may wish to communicate in hospital, clinic, police station or law court. She pays social visits to local mental hospitals and conducts a regular weekly handieraft and lip-reading class at the Manor Hospital.

The number of persons on the Register of Deaf and Hard of Hearing at 31.12.65 was as follows:—

Number of adults in the community	22
Number of adults in hospitals	39
Number of children up to school-leaving age	16
	77

(c) Physically Handicapped

The number of handicapped persons at the end of the year was 170. The main causes of disability were :—

1. Degenerative diseases including arthritis
2. Residual effects of disease or accident
3. Cerebro-vascular catastrophies (strokes)
4. Congenital defects
5. Multiple Sclerosis

The disabled are visited in their homes by a Social Worker who assists them to procure aids and who advises them on suitable house adaptations. The County Council's Occupational Therapy Unit at School Lane, Fetcham, assist her to obtain the aids and adaptations. The services of the County Council's team of occupational therapists and speech therapists are available for the disabled in the Borough. During the year the Borough Council supplied 53 aids to 34 persons and assisted three persons with home adaptation. The Borough Social Worker organised a fortnightly Club which caters for 20 handicapped persons, the majority of whom are wheelchair cases and are brought to and from the Club by special transport.

Access for the Disabled to Public Buildings

Many disabled get about only in wheelchairs and are handicapped socially and economically as well as physically. When they desire access to public buildings (e.g. libraries, concert halls, conveniences) steps and steep slopes are a serious obstacle. When planning the construction of public buildings and special housing in the future it behoves us to take into account the special needs of the handicapped. The Borough Council have given favourable consideration to a communication received from the Central Council for the Disabled containing the following recommendations :-

- 1. that consideration should be given for the provision of suitable access before planning permission is granted for the crection of new public buildings.
- 2. that consideration should be given for the provision of suitable access to existing buildings under the Council's control.
- 3. that the Council should consider drawing the attention of owners of existing public buildings outside the Council's control for the need to provide suitable means of access.

On bchalf of the Borough Council, the Voluntary Association for Surrey Disabled organise handicraft classes, holidays and transport.

Problem Families

The problem families and potentially homeless families are people who need help and too often they do not seek it until such a state has been reached that either partner is on the verge of a physical or mental breakdown. Our concern is for the welfare of the children. The common difficulties are associated with character defects and immaturity with mental retardation with finance and last, but not least, with unsuitable or inadequate housing conditions. Often these difficulties are combined or inter-related, e.g. emotional immaturity with breakdown of marriage, irresponsibility with debt, low intelligence with poor budgetting. Due to the increasing number of teenage marriages, some are being referred in the under 25 year old age group and their main problem is finance. As they have not learnt the pattern of home-making before marriage, they do not realise the skills and sacrifices required to run a home and a young family on only *one* pay-packet. Again women in our modern world can get a choice of jobs and so can be self-supporting ; they may leave their families when difficulties arise for so-called freedom without sufficient thought for their responsibilities as wives and mothers. In our Borough, physical cruelty is rare but not infrequently the child feels unloved, unwanted. This sense of deprivation may spring from parental ignorance, illness or apathy. Again one parent, usually the father, may desert and the other is left with such an intolerable burden that she feels unable to cope.

In seeking to rehabilitate the problem family we must first try to understand the causes of the breakdown and then, with firm and kindly guidance over a lengthy period, help them to help themselves using all the relevant social agencies at our disposal. As they begin to respond to a social pattern their "resistance" to proffered help breaks down and so life becomes easier and this is reflected in the improved health of the children.

At the end of the year (1965):-

Number of problem families under supervision	27
Number of children in these families	101
Number of children of these families in the care of the Local Authority .	3

Health Education

Health education is a continuous process which starts in the home. It is primarily through the example which parents, as basic educators set, that attitudes of healthy living are moulded and that habits such as over-eating, which are a danger to hcahth, are corrected. This educational process continues throughout school into adult life and the School Teacher, the Health Visitor, the District Nurse, the School Medical Officer and the Dental Surgeon are the main teachers. The wide field which they cover includes sound nutrition, food hygiene, mental health, dental health, physical education and accident prevention. The danger of cancer of the lung from cigarette smoking has been repeatedly brought to the attention of senior school children by posters, films and relevant talks but whether or not these have influenced the smoking habits of young people, it is difficult to say. The example of parents is of great importance for practice is stronger than precept but so long as the climate of opinion regards smoking as socially acceptable, health education is not likely to achieve much success.

In talks to young people the subject of venereal disease and its attendant dangers, have been included in the wider context of healthy living and responsibilities for parenthood.

During the year, Physiotherapists and Health Visitors conducted regular courses of relaxation and mothercraft classes for expectant mothers at the main Clinics in Ewell and Epsom. Both Clinics showed display boards on various aspects of health education. The Clinics also showed a wide variety of posters, which were changed frequently. Advice leaflets were available free of charge. During the year the Borough Council sponsored an exhibition which lasted for one week on Home Safety, Road Safety and on the importance of clean food handling. The public showed much interest and large organised parties of school children attended.

Care of the Elderly

The work of Townsend has been a powerful influence in promoting widespread intelligent appraisal of the needs of old people. His recent national survey on "The Aged and the Welfare State" suggests that whilst there are in this country just under 150,000 bedfast or otherwise severely incapacitated elderly people living in institutions, there are just over 500,000 living in private houses. The care of the old is largely a community responsibility and the family and the Welfare State must be thought of as complementary to each other. This survey showed that the Home Help Service, mobile meals, chiropody, investigation of hearing and vision, medical care and housing—all of these in varying degree, fell short of what elderly people required and that some of the services were poorly co-ordinated. Such findings are not new. It is well known that some elderly people do not ask for nursing or medical care because they are unaware that anything can be done for them. Again, many old people, apparently in need, do not use these services. Before these services are expanded, would it not be wise to make more careful enquiry or perhaps experiment to test the real attitude of the elderly? Is the time coming when a larger part of the Health Visitor's time should be allocated to supervision of the housebound who, whether through ignorance or frailty, are not using the services available? Our modern society has a wrong image of old age regarding it as a time of life without purpose and having no specific work to accomplish; briefly, an age of regret. One thing is clear, most old people remain members of a family and we must remember that they give services as well as receive them. Surely such contribution to the common good deserves fuller recognition which implies giving them more than bread alone. They need security, a sense of belonging and the knowledge that somebody *cares*, and these needs cannot be supplied on a prescription. In the Borough, statutory and voluntary services supporting the elderly work closely together. During the year the Old People's Welfare Committee extended their Meals on Wheels Service to cover five days a week. Now 120 meals a day are served from the newly equipped Central Kitchen at The Cedars. I am pleased to report that quite soon we hope to open a one-day a week Lunch Club for the purpose of bringing some of the more socially isolated and housebound into a friendly informal atmosphere where, in addition to partaking of a good meal, they can enjoy the company of their fellows and share in occupational activities and in music.

Under the direct administration of the Borough Council, there is a comprehensive Chiropody service both for the ambulant and for the housebound. In Epsom, the whole-time services of a Health Visitor are available to visit the elderly who are under the care of two group medical practices. The Geriatric Welfare Clinics (Care and Guidance Centres) are now well established weekly both at Epsom and Ewell Court Clinics and are proving valuable in the early detection of common conditions such as poor vision, deafness and anaemia. Here I should like to pay tribute to the services of voluntary workers who attend faithfully every week and who, by their gracious presence, help to give the Clinics a friendly and informal atmosphere.

Mental Health

Since the Mental Health Act 1959, the emphasis has been on Community Care which has now become an important section of the domiciliary social services. The mentally ill and mentally subnormal persons in the community are visited by the Mental Welfare Officer and trained social workers as well as by Health Visitors. Thus the visiting staff try to provide a supportive service to help the patient and his family and to encourage him to take his rightful place in the life of the community. Many improve and live quite happily in their own homes and through employment become partly or wholly self-supporting; yet many continue to need help throughout their lives.

Training Centres for the Sub-Normal

The treatment of the sub-normal patient involves treatment of the family. Ascertainment and assessment should be done at an early age so that plans may be made for the child's training and treatment. From recent research on learning and transfer processes we know that sub-normal children readily copy carefully planned repetitive patterns and so they learn handicrafts. These useful, if mechanical occupations, encourage them to reach their maximum potential, give them self-confidence and so increase their self-respect. At the Old Schools Lane, Ewell, 50-place Junior Training Centre, the pattern of the day includes training in socially acceptable habits, singing or organised games, music and creative work with coloured materials. The few hours spent here give the harassed mother a welcome break. Fifteen children from the Borough attended this Centre in 1965.

At the 100-place Adult Technical Training Centre at Banstead, sub-normal trainees are taught to operate a variety of machines and undertake light industrial processes. The work is carried out for factories which pay the Centre for the work done and this payment is shared by trainees according to their output. Fourteen adults from the Borough attended at Banstead during 1965. Daily transport is provided to and from both Adult and Junior Training Centres.

Voluntary Organisations

The work of voluntary organisations in the Borough is represented by :-

- (1) *Industrial Therapy Organisation (Epsom) Ltd., Stones Road, Epsom, registered under the Charities Act.*

Starting from humble beginnings three years ago, this organisation, now firmly established, is self-supporting, and provides places for 75 trainees. The premises with a floor area of 3,100 sq. ft.

were adapted from a disused bakery. Selected persons are welcomed both from local mental hospitals and from family doctors and their rehabilitation consists in their ability to re-acquire regular work habits in a modern factory atmosphere. In an 8-hour working day, instruction is given in industrial sub-contract light engineering work and trainees learn under the guidance of wise and sympathetic instructors how to prepare themselves for paid employment in the work-a-day world. Many are able to progress to secure full-time employment in suitable industries. This voluntary organisation derives its sources of income from payments for work completed on behalf of industrial firms and from training allowances paid by the Ministry of Labour. These allowances give the trainee financial independence and self-reliance and so leave him or her free to concentrate on and to enjoy the training and rehabilitation.

(2) *The Handshake Club, 44 Waterloo Road, Epsom.*

This Club run by the Epsom League of Friends for Mental Health is a Social Club which helps in the rehabilitation of the ex-mentally ill and of sub-normal persons. Throughout the year it was open two afternoons and two evenings weekly. The building is now being adapted and added to so that it will become a Day Centre with an Occupational Therapy Unit. The Day Centre will be staffed entirely by trained Social Workers of the County Council while social amenities will be provided, as in the past, by the League of Friends.

Mental Health—Statistics

(a) *Mental Illness—Mental Health Act, 1959*

CASES DEALT WITH INSIDE THE LOCAL (MENTAL) HOSPITALS									
						<i>Males</i>	<i>Females</i>	<i>Total</i>	
Section 25 (Observation Order)	.	.	.	.	.	78	86	164	
Section 26 (Treatment Order)	.	.	.	.	.	55	55	110	
Total	.	.	.	.	.	133	141	274	

HOSPITAL ADMISSIONS FROM ADDRESSES IN EPSOM AND EWELL				
		<i>Males</i>	<i>Females</i>	<i>Total</i>
Section 5 (Informal)*	.	27	30	57
Section 29 (Emergency Observation—3 day Order)	.	18	16	34
Section 25 (Observation Order—28 days)	.	4	4	8
Section 26 (Treatment Order)	.	—	—	—
Section 136 (Police Order—3 days Place of Safety)	.	3	2	5
Total	.	52	52	104

* This figure represents the number of patients admitted informally by the Mental Welfare Officer. A larger number are admitted informally by medical practitioners and from psychiatric clinics but we have no record of this figure.

(b) *Care and After-Care*

Fifteen males and twenty-eight females were referred to Mental Health Officers (including Mental Health Social Workers) for supportive care.

Total number receiving Community Care as at 31st December, 1965 :—

Males	.	.	.	.	20
Females	.	.	.	.	46
					66

(c) *The Sub-Normal and Severely Sub-Normal*

POSITION AT END OF 1965			
	<i>Male</i>	<i>Female</i>	<i>Total</i>
Number of children attending Junior Training Centres	8	7	15
Number of adults attending Senior Training Centres	10	4	14
	<hr/> 18	<hr/> 11	<hr/> 29
Number of children in community care of Health Visitor	10	9	19
Number of adults in community care of Health Visitors and Mental Health Officers	32	13	45
	<hr/> 42	<hr/> 22	<hr/> 64

Health Centres

Both local authority health staff and general practitioners are beginning to see clearly that they have a common bond, namely the care of the citizen in his natural surroundings in the community as opposed to medical care in hospital. In accordance with this modern trend, family doctors in this area have expressed a desire for group practice accommodation where they can treat their patients with the active help of the Health Visitor, District Nurse/Midwife and Social Welfare Workers. This integration of the family doctor with the local authority health and welfare staff in a building specially constructed for the purpose, is the modern conception of a full Health Centre. The Centre would, of course, include the accommodation required for the day to day local authority Clinic Services and medical suites for the family doctors. I am pleased to report that the Council envisage the building of a new Health Centre in Ewell Village to serve an estimated population of upwards of 20,000. This project is included in the Surrey County Council's Health Service Building Programme for 1967-68.

LOCATION AND TIME-TABLE OF CLINICS

ANTE-NATAL CLINICS

Epsom District Hospital	Mon., Thurs.	2.00 p.m.
Church Street, Epsom	Fri. (Midwives)	2.00 p.m. - 4.00 p.m.
Ewell Court, Ewell	Mons.	9.30 a.m. - 12 noon
	Tues. (Midwives)	2.00 p.m. - 4.00 p.m.
	Fri. (Midwives)	2.00 p.m. - 4.00 p.m.

CHILD WELFARE CLINICS

Church Street, Epsom	Mon., Wed.	2.00 p.m. - 4.00 p.m.
Ewell Court, Ewell	Mon., Wed., Thurs.	1.30 p.m. - 4.00 p.m.
Dell Road, Stoneleigh	Tues.	2.00 p.m. - 4.00 p.m.
St. Stephen's Church Hall, Rosebery Road, Epsom Downs	1st, 3rd & 5th Tues. in month	
Community Centre, Wells Estate, Epsom	2nd & 4th Tues. in month	
St. Paul's Church Hall, Northey Avenue, Cheam	Wed.	2.00 p.m. - 4.00 p.m.

DENTAL CLINICS

Church Street, Epsom	<i>By Appointment</i>
Ewell Court, Ewell	<i>By Appointment</i>

EYE CLINICS

Church Street, Epsom	<i>By Appointment</i>
Ewell Court, Ewell	<i>By Appointment</i>

FAMILY PLANNING ASSOCIATION

Epsom District Hospital	Tues., Fri.	7.00 p.m. - 8.00 p.m.
Church Street, Epsom	Thurs.	9.30 a.m. - 12 noon
Ewell Court, Ewell	Tues.	9.30 a.m. - 12 noon

CHEST CLINIC

Epsom District Hospital	Mon., Tues.	2.00 p.m.
	Thurs.	9.30 a.m.
	1st Thurs. (B.C.G.)	2.00 p.m.
	3rd Thurs.	5.30 p.m.
	Fri.	9.30 a.m.

VENEREAL DISEASES CLINIC

St. Helier Hospital	<i>Males :</i> Mon.	10.00 a.m. - 12 noon
	Thurs.	4.00 p.m. - 6.00 p.m.
	<i>Females :</i> Tues.	5.00 p.m. - 7.00 p.m.
	Fri.	2.00 p.m. - 4.00 p.m.

(And at the Out-Patient Department of many London Hospitals)

IMMUNISATION AND VACCINATION CLINICS

Church Street, Epsom	Fri.	9.30 a.m. - 12 noon
Ewell Court, Ewell	2nd, 4th & 5th Mon.	11.00 a.m.

MINIATURE X-RAY CLINIC

Epsom District Hospital	Mon.	2.00 p.m. - 3.00 p.m.
	Tues.	10.30 a.m. - 11.30 a.m.

PART THREE

ENVIRONMENTAL

HEALTH

SERVICES

May, 1966

To the Mayor, Aldermen and Councillors of the Borough of Epsom and Ewell

MR. MAYOR, LADIES AND GENTLEMEN,

I beg to submit my Annual Report on the work of the Public Health Inspectors for the year ended 31st December, 1965, in accordance with the Public Health Officers Regulations, 1959.

Once again the number of inspections and visits has increased and at 9,291 is 606 up on last year's figures. Scrutiny of the summary list shows that the main work of the Department falls into four sections, namely :—

	<i>Inspections and Visits</i>
Housing	1,775
Drainage	1,599
Food and Food Hygiene	2,049
Offices and Shops	1,176

On Housing, I would draw your attention to the commencement which was made in relation to the compulsory improvement of tenanted dwellings and the steady progress maintained in dealing with unfit properties.

The work on drainage which continues to show as an increasing factor, is due to the increase in works of alteration and improvement taking place, mainly to private houses, where higher standards are now being sought.

The section on Food again illustrates the importance given to this part of the work of the Department and the very extensive coverage provided. For the first time two prosecutions (both successful) were taken under the Food Hygiene (General) Regulations, 1960. Six prosecutions under the Food and Drugs Act, 1955, were successfully undertaken, which is one less than last year, although the number of complaints fell sharply from 92 to 46 this year.

At 1,176, being an increase of 774 on last year, the inspections and visits for the first full year of the working of the Offices, Shops and Railway Premises Act, 1963, show a measure of solid achievement in the operation of this new social legislation.

This year marked the retirement of Dr. C. Ive, Medical Officer of Health, with Dr. P. H. R. Anderson being appointed his successor. It is apparent that the happy relationship which existed with Dr. C. Ive is being continued with Dr. P. H. R. Anderson, to whom I would already express my appreciation for his help and guidance.

I should also like to record my appreciation of the support given me by Members of the Council, to the Officers of other Departments for their co-operation, to the staff of the Department for their continued loyal support, and particularly to the Chairman of the Public Health Committee, Alderman W. J. Clark, F.I.A.S., F.R.S.A., F.R.S.H., for his encouragement in the promotion of the advancement of the standards of Public Health.

I am, Ladies and Gentlemen, Your obedient Servant,

L. H. GRACE
Chief Public Health Inspector

SANITARY INSPECTION OF THE AREA

Summary of Inspections and Visits

Dwelling houses :-	
Under P.H. Act and Housing Acts	274
Reinspections	561
Other Premises :-	
Under P.H. Acts, 1936 and 1961	152
Reinspections	317
Complaints investigated (excluding rats and mice)	471
Drainage :-	
Inspections	1,599
Water Tests	255
Smoke Tests	22
Other Tests	5
Cesspools inspected	66
Animal Boarding Establishments Act, 1963	3
Betting, Gaming and Lotteries Acts, 1963-64	13
Children's Nightdresses Regulations, 1964	3
Clean Air Act, 1956	189
Employment Agencies	4
Factories :-	
With Power	132
Without Power	8
Outworkers	9
Food :-	
Inspection of Premises	1,697
Slaughterhouses—Meat Inspection	6
Visits re. Unsound Food	346
Heating Appliances and Fireguards	2
Infectious Disease—Enquiries and Visits	354
Insect Pests	105
Keeping of Animals or Poultry	4
Noise Abatement Act, 1960	24
Pet Animals Act, 1951—Licences, etc.	8
Public Conveniences	90
Rat or Mice Infestation	22
Riding Establishments Act, 1964	17
Rivers and Streams	19
Schools—Sanitary Accommodation, Disinfestation, etc.	45
Scrap Metal Dealers Act, 1964	23
Shops Act, 1950—Hours, etc.	322
Offices, Shops and Railway Premises Act, 1963 :-	
Offices	221
Shops	955
Smoke Observation or Air Pollution	15
Stables and Piggeries	32
Swimming Pools	35
Tents, Vans and Sheds	89
Theatres, Cinemas, Halls, etc.	6
Vacant Land, Dumps, etc.	63
Verminous Premises or Articles	4
Visits, Miscellaneous (not included above)	704
	9,291

SAMPLING

Samples under Food and Drugs Act, 1955	83
Ice-Cream Samples	137
Milk Samples (bacteriological)	113
Bacteriological Sampling of Sundry Foods	65
Water Samples from :-	
Main Supplies (domestic)	87
Mental Hospitals—	
Deep well	41
Mixed supply	42
Mains supply	199
Swimming Baths and Pools	45

COMPLAINTS

The following is a summary of complaints received during the year

Insanitary condition of premises	58
Overcrowding	1
Flooding	5
Choked or defective drains	228
Offensive accumulations	17
Nuisance from flies or other insect pests	15
Vermis	1
Defective dustbins	1
Offensive smells	35
Unsound Food, etc.	32
Factory and Shops Act	1
Smoke	29
Animals and Poultry kept so as to be a nuisance	3
Dirty Milk Bottles, etc.	7
Noise	10
Miscellaneous	28
	<hr/> 471
Additionally, 543 complaints were made in respect of Rats and Mice infestation	543
	<hr/> 1,014

NOTICES

Number of Notices served under the following Acts

Public Health Act, 1936 (Section 93) (Statutory)	2
Public Health Act, 1961 (Section 17) (Statutory)	3
Public Health Act, 1936 (Informal)	67
Factories Act, 1961 (Informal)	6
Food and Drugs Act, 1955 (Informal)	74
Offices, Shops and Railway Premises Act, 1963 (Informal)	298
	<hr/> 450

Number of Notices outstanding at end of year (Public Health and Housing) — 13

SUMMARY OF NUISANCES ABATED, DEFECTS REMEDIED AND OTHER MATTERS ATTENDED TO

Dwelling Houses and Other Premises

Roofs repaired	18
Eaves gutters and downpipes repaired	8
Chimney stacks rebuilt or repaired	1
Repointing or rendering of brickwork	2
Other work carried out to remedy dampness	7
Choked drains cleared	216
Drains repaired or relaid	89
Inspection Chambers built or repaired	70
New W.Cs. installed	65
W.Cs. renewed or repaired	49
W.C. flushing cisterns renewed or repaired	10
New baths installed	45
Soil Vent Pipes or F.A.Is. renewed or repaired	23
New gullies provided	50
Sink gully surrounds repaired	1
New sinks or wash-hand basins provided or renewed	134
Wastepipes provided or renewed	1
Water Service Pipes renewed or repaired	5
Cesspools emptied or repaired	11
New dustbins provided	6
Yard paving provided or repaired	2
Rooms cleansed and redecorated	6
Plaster of walls and/or ceilings repaired	15
Floors repaired or renewed	9
Firplaces or ranges repaired or renewed	1
Doors repaired or renewed	4

Dwelling Houses and Other Premises—*continued*

Window frames repaired or renewed	7
Sasheords renewed or provided	5
Rooms sprayed for vermin	1
Rooms, etc., sprayed for flies or other insect pests	13
Nuisances from animals or poultry abated	1
Offensive accumulations removed	2
Other nuisances abated or defects remedied	3

HOUSING

I. Inspection of dwelling-houses during the year

1 (a) Total number of dwelling-houses inspected under the Public Health or Housing Acts	274
(b) Number of inspections or re-inspections	561
2. Number of dwelling-houses found not to be in all respects reasonably fit for human habitation	53

II. Number of defective dwelling-houses rendered fit

(a) After Informal Notice	38
(b) After service of Formal Notice	2
(c) Number of Notices outstanding at end of year	13

III. Proceedings under the Housing Act, 1957

(a) Individual Unfit Houses :—	
Number of dwelling-houses found unfit for human habitation and represented under Section 16(1) of the Housing Act, 1957	14
Resulting action :—	
Demolition Orders made	6
Closing Orders made	2
Deferred	6

No. 2 Clearance Area, 1962

Comprising eight dwellings. Area declared. Order for demolition made and confirmed by Ministry of Housing and Local Government on the 29th April, 1964.

Three tenants re-housed by Council. Four tenants found own accommodation. One house still occupied at end of year.

No. 1 Clearance Area, 1965

Comprising seven dwellings. Area declared. Confirmation expected by summer of 1966.

Slum Clearance

A re-assessment of the Slum Clearance position was made in 1964 in relation to the Council's overall housing requirements. This resulted in a large additional number of premises being listed for possible future action and the present position on Slum Clearance is shown below :—

Houses listed since 1955

Survey	Additions	Survey	Additions	Total
1955	1956-63	1964	1965	
73	51	151	5	280

Progress since 1955

As a result of Clearance Schemes, the making of Demolition and Closing Orders and the repair of Unfit Houses on undertakings, 106 properties have been dealt with, leaving an estimated 174 outstanding.

Although the sub-heading of this Section is shown as "Slum Clearance", it should be understood that the figure of 174 outstanding, relates to those houses which on inspection may be shown to require action for closure or demolition and that in addition to the definition of fitness (Section 4, Housing Act, 1957), by which they are judged, due regard is paid to the overall standard of dwellings in the Borough. The net effect is to the good when comparisons are made with other parts of the country. The rate of progress which can be achieved is governed by the ability of the Council to re-house the displaced families and close liaison exists between the Public Health and Housing Committees.

Re-housing

During 1965, seven families were re-housed by the Corporation as a result of formal action taken under the Housing Acts.

Under this heading the total number of family units re-housed since the inception of the Slum Clearance Programme in 1955, is 61.

Improvement of Houses

The Housing Act, 1964, gives power to local authorities to require in certain circumstances, the improvement of tenanted dwellings which were built before the end of 1944, or provided by conversion before the 3rd October, 1961, of pre-1945 buildings.

The improvements relate to the provision of the Standard Amenities, which in full are :-

- (a) a fixed bath or shower, which, if reasonably practicable, is to be in a bathroom ;
- (b) a wash-hand basin ;
- (c) a hot and cold water supply at a fixed bath or shower and at a wash-hand basin and at a sink ;
- (d) a water closet which must, if reasonably practicable, be in and readily accessible from the dwelling ; and
- (e) satisfactory facilities for storing food.

During the year the Council declared its first Improvement Area which comprised 54 houses. Of this number 11 houses were tenanted and action was initiated to serve Preliminary Notices in respect of nine of these houses. At the same time steps were taken to encourage the owner/occupiers in this Improvement Area to apply for grants to improve their properties where necessary.

One application was received from a tenant, being outside an Improvement Area, for the Council to exercise their like powers to improve the dwelling to the full or reduced standard. The application was under consideration at the end of the year.

During 1965, 44 Standard Grants and two Discretionary Grants were approved by the Council. The administration work was carried out by the Borough Engineer and Surveyor and the Public Health Inspectors co-operated in the inspection and approval of much of the work.

All the above relate to voluntary applications for improvement.

Houses in Multiple Occupation

The Housing Act, 1964, strengthens and extends the powers given to local authorities in Part II of the Act of 1961, which made provision in general for improving the standards in the living conditions of these types of dwellings.

The work of inspection and control of premises coming within the definition of Houses in Multiple Occupation, which commenced in 1963, continued during the year and the present position is as follows :-

Number of premises inspected during 1965	53
Number of premises in use at the end of 1965	15

No undue delay has been experienced in securing the improvements necessary to satisfy the Standards adopted by the Council, and no action has been necessary to make Control Orders. (Control Orders allow local authorities to take multi-occupied houses into their stewardship for a period which are intended to deal with the worst cases of squalor).

Rent Act, 1957—Certificates of Disrepair

During the year one application was received for a Certificate of Disrepair. The premises concerned were inspected to confirm the defects referred to in the Notice served by the tenant on the Landlord and the necessary authority was obtained to notify the Landlord (on Form J) of the Council's proposal to issue a Certificate of Disrepair.

The following is a summary of the position with regard to applications on the 31st December, 1965 :-

Undertakings (Form K) received from Landlords	85
Certificates of Disrepair issued	21
Applications for Certificates as to remedying defects	6
Applications for Certificates not approved	3
Applications under consideration	—
Total number of applications received	115
Certificates of Disrepair cancelled	8

Schools

All schools in the Borough are visited for the purpose of milk and water sampling, inspection of sanitary accommodation and inspection of canteens and kitchens.

There are nineteen private schools in the Borough.

FACTORIES ACT, 1961

Prescribed Particulars on the Administration of the Factories Act, 1961

(1) *Inspections for purposes of provision as to health (including inspections made by Public Health Inspectors)*

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6, are to be enforced by Local Authorities	3	3	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	124	137	6	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	11	3	—	—
Total	138	143	6	—

(2) *Cases in which defects were found*

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred		
			To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1)	8	8	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary conveniences (S.7):—					
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or defective	1	1	—	1	—
(c) Not separate for sexes	—	—	—	—	—
Other offences (not relating to outwork)	11	11	—	—	—
Total	20	20	—	1	—

(3) *Outwork (Sections 110 and 111)*

Nature of Work (1)	Section 110			Section 111		
	No. of outworkers in August list required by Section 110(1)(e) (2)	No. of cases of defaults in sending lists to the Council (3)	No. of prosecutions for failing to supply lists (4)	No. of instances of work in unwhole- some premises (5)	Notices served (6)	Prosecutions (7)
Wearing apparel (making etc., cleansing & washing)	2	—	—	—	—	—
Curtains and furniture hangings	1	—	—	—	—	—
Total.	3	—	—	—	—	—

FOOD AND DRUGS ACT, 1955

Inspections and Supervision of Food

Food Hygiene (General) Regulations, 1960

This section of the report deals with matters relating to food including the inspection of food premises, food sampling and other work carried out by the Public Health Inspectors in connection with the supervision of food supplies. The following table shows the number of premises in the Borough classified under the various trades or businesses, where food is sold, manufactured, stored and handled.

Food premises grouped in categories of trade carried on in them including the following information:—

<i>Category</i>	<i>No. of Premises</i>	<i>No. of premises complying with Regulation 16 (wash-hand basins)</i>	<i>Premises to which Regulation 19 applies. Facilities for washing food and equipment</i>	<i>Premises complying with Regulation 19</i>
Bakehouses and Bakers' Shops	19	19	19	19
Butchers	28	28	28	28
Cafes	32	32	32	32
Clubs	9	9	9	9
Confectioners	71	71	71	71
Dairies and Milk Depots. . .	3	3	3	3
Fishmongers and Fried Fish Shops	17	17	17	17
Greengrocers (Wholesale and Retail)	35	35	35	35
Grocers (Wholesale and Retail)	74	74	73	73
Kitchens :—				
Factory	7	7	7	7
Hotel	8	8	8	8
Hospital & Nursing Home	11	11	11	11
School—Council . . .	18	18	18	18
School—Private . . .	9	9	9	9
Multiple Food Stores (Supermarkets)	8	8	8	8
Public Houses and Off-Licences	58	58	58	58
Total	407	407	406	406

Of the preceding premises, 169 are registered under Section 16 of the Food and Drugs Act, 1955, as follows :—

Manufacture of Ice-cream	1
Retail sale of Ice-cream	115
Preparation or manufacture for sale of sausages or potted, pressed, pickled or preserved food	53

Food Hygiene (General) Regulations, 1960

The Regulations apply to any place where food is handled or supplied in the course of a food business, whether there is actual sale or not. They apply, broadly speaking, throughout the food and catering trades, and to the supply of food in clubs, schools, residential establishments and staff canteens, and also to stalls and vehicles and now to ships.

The aim of the Regulations is to set a practical standard of food hygiene and centres on three main aspects : the structural condition of the premises, the construction and cleanliness of articles and equipment with which food may come into contact, and the cleanly practices of food handlers themselves while they are preparing or handling the food.

The re-inspection of food premises is a constant duty imposed by the Regulations. The type of premises visited with the number of inspections made are set out in the following list :—

<i>Type of Premises</i>	<i>No. of Inspections and Visits</i>
Bakehouses	26
Bakers and Confectioners	58
Butchers	161
Cafes, Canteens and Kitchens	180
Dairies and Milk Shops	54
Fishmongers and Poulterers	34
Fried Fish Shops	23
Greengrocers and Fruiterers	164
Grocery and Provision Stores	226
Ice-cream Manufacturers	52
Ice-cream Retailers	107
Ice-cream Vehicles	24
Licensed Premises	121
Market Stalls and Food Vehicles	252
Sweets and Sugar Confectionery	88
Visits, Miscellaneous (not included above)	127
Total	1,697

Informal Action

The following matters have been attended to during the year as a result of verbal or written notices :—

Walls and/or ceilings cleansed	46
Plaster of walls and/or ceilings repaired	22
Floors renewed or repaired	11
Other structural repairs carried out	4
Sinks installed or renewed	3
Constant hot water supply installed over sinks	1
Yard paving provided or repaired	1
New dustbins provided	3
Nuisances abated or other defects remedied	18

Sanitary conveniences and facilities for Staff

W.Cs., etc., cleansed and/or redecorated	7
Wash-hand basins installed or renewed	11
Constant hot water supply installed over existing wash-hand basins	7
Soap, Nail Brushes or Towels provided	2
First-Aid materials provided	24
Accommodation provided for clothing	6

Formal Action

Legal proceedings were taken in respect of offences against the Food Hygiene (General) Regulations, 1960, resulting initially from routine inspection of premises, etc. The details are as follows :—

Case No. 1—Cafe

Fine of £75 imposed with 20 guineas costs in respect of nine counts concerned with the state of cleanliness of equipment, walls and ceilings and the disrepair of walls and ceilings.

Case No. 2—Mobile Food Van (Ice-cream)

Fine of £22 imposed in respect of failure to provide hot water, soap and towels and exhibit name and address on vehicle.

MILK

The one remaining producer within the Borough ceased production in August, 1965 (Horton Estate Farm—South West Metropolitan Regional Hospital Board).

All milk sold is retailed by a few large Dairy Companies being mainly produced in distant areas and transported to large processing plants within the London Region.

Milk Supply

Control in respect of the distribution and type of milk sold in the Borough is obtained under the following Regulations :-

(a) Distribution

Milk and Dairies (General) Regulations, 1959

Milk Distributors registered in the area	3
Premises registered as Dairies	3

(b) Licensing

Milk (Special Designation) Regulations, 1963, and the Milk (Special Designation) (Amendment) Regulations, 1965

Dealers (Pre-Packed) Milk Licences valid for a period of five years, are in force in respect of the following milks :-

Untreated	18
Pasteurised	19
Sterilised	21

From the 1st October, 1965, a new special designation "Ultra Heat Treated" was prescribed for milk which has been processed by the ultra high temperature method, i.e. heated to not less than 270°F. for not less than one second.

If this milk is packed under sterile conditions it is said to have an indefinite life, but in any case, it is claimed to stay perfectly fresh for at least nineteen days. It is available with other designated milks, i.e. "Pasteurised", "Sterilised" and "Untreated" and subject to similar licensing requirements.

The amount coming on the Home Market in the near future is not expected to be very great, and no applications for licences in respect of this new designation were received up to the end of 1965.

Milk Sampling

During the year 113 samples of milk were taken from milk distributors, including supplies to local hospitals and schools, and submitted for bacteriological examination.

The following summary gives details of the grades of milk sampled and results of the examinations :-

Grade	No. of Samples
Untreated	5
Pasteurised	100
Sterilised	7
Separated	1

Results of Tests

	METHYLENE BLUE TEST		PHOSPHATASE TEST		TURBIDITY TEST	
	<i>Satisfactory</i>	<i>Unsatisfactory</i>	<i>Satisfactory</i>	<i>Unsatisfactory</i>	<i>Satisfactory</i>	<i>Unsatisfactory</i>
Untreated	5	—	—	—	—	—
Pasteurised	100	—	100	—	—	—
Sterilised	—	—	—	—	7	—
Separated	1	—	—	—	—	—
	106	—	100	—	7	—

Additionally, 16 samples of milk were taken from the dairy farms at Horton and Long Grove Hospitals at the request of the Ministry of Health and submitted to the Epsom Public Health Laboratory for examination by the Methylene Blue Reduction and the Clot-on-Boiling Tests. This sampling ended in August when milk production ceased.

MEAT AND OTHER FOODS

Slaughterhouses

There are no licensed slaughterhouses in the Borough.

A slaughterhouse, not subject to licensing, has been in use for some years at Horton Farm (South West Metropolitan Regional Hospital Board), but slaughtering here ceased as from the 13th April, 1965.

The following summary relates to the inspection of animals after slaughter at the above mentioned slaughterhouse up to the time of its closure (April, 1965).

Carcases inspected and condemned

	<i>Cattle excluding Cows</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>	<i>Horses</i>
Number killed (if known)	—	—	—	—	35	—
Number inspected	—	—	—	—	35	—
<i>All diseases except Tuberculosis and Cysticerci—</i>						
Whole carcases condemned	—	—	—	—	—	—
Carcases of which some part or organ was condemned	—	—	—	—	7	—
Percentage of the number inspected affected with disease other than Tuberculosis and Cysticerci . . .	—	—	—	—	20%	—

Tuberculosis and Cysticerci : No carcases, parts of carcases or organs inspected were found to be affected with Tuberculosis or Cysticerci.

SLAUGHTER OF ANIMALS ACT, 1958

One application for the renewal of licence to slaughter animals under the above Act was received and considered by the Council. The licence was granted.

Condemned Meat and Other Foods

The following meat and other foods were inspected at shops and food stores within the Borough and found to be unfit for human consumption :—

<i>Article</i>	<i>lbs.</i>	<i>Tins or Jars</i>	<i>Packets, Cartons or Numbers</i>
Apple Turnovers	—	—	80
Bacon	11½	—	—
Bread Mix	—	—	12
Butter	4	—	—
Cakes and Pastries	—	—	328
Cereals	—	—	390
Cheese	61½	—	—
Cheese Spread	—	—	33
Cornish Pasties	—	—	58
Cream	—	34	—
Fish	784	115	—
Frozen Foods	1,121½	—	2,471
Fruit	—	2,238	—
Fruit—Dried	82	—	—
Ice-cream Ingredients	114	—	—
Jam and Marmalade	—	41	—
Meat and Offal	1,062	250	—
Meat Pies	—	—	111
Milk	—	96	—
Miscellaneous	—	152	92
Potato Crisps	—	—	71
Rice	—	17	—
Sausage Rolls	—	—	298
Soup	—	233	—
Vegetables	—	1,270	—

The foods surrendered were destroyed

Butchers ' Shops

There are 35 butchers' shops in the Borough all of which have been periodically inspected during the year, 161 inspections being made.

A refrigerator or other means of cold storage is provided at each shop and all have permanent glass windows as shop fronts.

The standard of cleanliness in butchers' shops has, on the whole, been very satisfactory.

Bakehouses

Twenty-six inspections and visits were made during the year to seven bakehouses.

The standard of repair and cleanliness remains high, these conditions being maintained without recourse to enforcement action. Much of the bread and confectionery sold in retail shops is produced outside the Borough.

Sampling

Formal and informal samples have been taken regularly by the Public Health Inspectors as Sampling Officers and forwarded to Mr. D. D. Moir, who is appointed as Public Analyst to the Corporation.

During the year 83 samples were submitted for analysis, and as will be seen by the following summary covered a wide range of commodities.

ARTICLE	NUMBER OF SAMPLES EXAMINED		REPORTED ADULTERATED OR OTHERWISE GIVING RISE TO IRREGULARITY	
	<i>Formal</i>	<i>Informal</i>	<i>Formal</i>	<i>Informal</i>
Beefburgers		1		
Beef Patty		1		
Bronchial Balsam		1		
Buns with real dairy cream filling . .		2		
Butter—Rum flavoured		1		
Calamine Cream		1		
Cereals		2		
Chicken Fritters		1		
Cocktail Cherries		1		
Cornish Pasties		2		
Cucumbers in Vinegar		1		1
Cultured Buttermilk		1		
Drinking Chocolate		1		
Evaporated Milk		1		
Faggots		2		
Figs		1		
Fish Cakes		2		
Fish Sticks		1		
Golden Butter Mints		1		
Haggis		1		
Hamburgers		1		
Ice-cream		1		
Ice-cream—Soft		2		
Instant Powdered Whole Milk		1		1
Kaolin Poultice		1		
Lamb Tongues		1		
Liqueur Cocktails		1		
Liqueur Chocolates		1		
Liver Sausage		1		
Meat Pasties		1		
Meat Pies		1		
Milk	10	8		
Milk Chocolate		1		
Minced Steak	1			
Oranges		1		
Pork Burgers		1		
Potted Beef with Butter		1		
Sauce—Favourite		1		
Sausages—Beef	1			
Sausages—Pork	9			
Sausage Rolls		1		
Scotch Eggs		1		
Shredded Beef Suet		1		
Slimcea "High Protein" Bread		2		
Sponge Mixture		1		
Steakettes		1		
Sweetened Cream Rice Milk Pudding .		1		
Tea		2		
Tip Top Fruit Topping		1		
Vin Rouge de Tunisie		1		
Total	21	62		2

Of the 83 samples, two were reported as unsatisfactory relating to labelling irregularities. Details are as follows :—

<i>Sample No. and Description</i>	<i>Irregularity</i>
Cucumbers in Vinegar . . . Sample No. 17 (Informal)	The ingredients were not specified on the label in accordance with the Labelling of Food Order, 1953.
<i>Action taken</i> : Stock withdrawn by Wholesale Merchant and arrangements made to amend the label.	
Instant Powdered Whole Milk Sample No. 23 (Informal)	Labelling not in accordance with either the Dried Milk Regulations, 1923 to 1948, or with the Dried Milk Regulations, 1965, as to size of lettering.

Action taken : Importers arranged for their supplier to amend the label.

Complaints

During the year 39(81) complaints were received in respect of food generally with 7(11) specifically in respect of milk and milk bottles. The figures in brackets are for 1964, showing a marked fall this year.

With the exception of those which were of a minor nature, all complaints were reported to the Public Health Committee for their consideration.

Resultant action was that six prosecutions were authorised, details of which are as follows:—

- Case No. 1.* Loaf of Bread—contained a piece of glass. Defendants pleaded guilty—were fined £25 with £7. 7s. 0d. costs.
- Case No. 2.* Potato Chips served as part of meal—contained a piece of wire. Defendant pleaded guilty—was fined £10 with £5. 5s. 0d. costs.
- Case No. 3.* Bun Round—contained a ball bearing. Defendants pleaded guilty—were fined £10 with £5. 5s. 0d. costs.
- Case No. 4.* Jar of Strawberry Jam—contained parts of a Greenbottle Fly. Defendants pleaded guilty—were fined £25 with £5. 5s. 0d. costs.
- Case No. 5.* Mouldy Steak and Kidney Pie. Defendants pleaded guilty—were fined £20 with £5. 5s. 0d. costs.
- Case No. 6.* Mouldy Steak and Kidney Pie. Defendants pleaded guilty—were fined £10 with £5. 5s. 0d. costs.

Ice-Cream

Registration

During the year one application for the registration of premises for the sale and storage of ice-cream was received and granted, and at the end of the year 116 premises were registered in accordance with Section 16 of the Food and Drugs Act, 1955.

All retailers obtain their supplies from outside the Borough with the exception of one, who manufactures it on the premises.

Bacteriological Sampling

During the year 137 samples of ice-cream were taken for bacteriological examination. The provisional grading showed the following results :—

Grade I	79
Grade II	22
Grade III	22
Grade IV	14
	<hr/>
	137

In assessing the bacteriological standard of ice-cream, Grades III and IV results are regarded as having not satisfied the statutory test based on the de-colorisation of methylene blue.

Of the 36 samples in Grades III and IV, 18 were of soft ice-cream taken from cafes and mobile vehicles and 18 from one manufacturer where the introduction of organisms of a non-pathogenic nature had the effect of decolorising methylene blue and so giving unsatisfactory results where otherwise the ice-cream would have satisfied the test.

It is significant that all samples of wrapped or pre-packed ice-cream gave Grade I results and that apart from the special case of the manufacturer previously mentioned, the other samples giving Grades III and IV results were of soft ice-cream.

I am of the opinion that to obtain *constantly good* results (Grades I and II), ice-cream must be manufactured in a factory where strict supervision is maintained in all the stages of manufacture, and where the product is pre-packed in the form it is sold to the public.

Chemical Sampling

During the year one sample of ice-cream and two of soft ice-cream were taken for chemical examination and found to comply with the required standards.

SHOPS ACT, 1950

The Council is the authority responsible for the enforcement of the provisions of the Act as they relate to Hours of Closing and Sunday Trading.

The General Closing Hours are 8 o'clock with 9 o'clock on the late day. No Orders as to closing hours or the early closing day have been made by the Local Authority. Wednesday is generally recognised as the early closing day, but the strict observance of this weekday for half-day closing is decreasing and there are signs nationally that would indicate a desire to give greater freedom of choice to the traders.

During the year a White Paper was issued by the Home Office, being "Suggested Provisions for Amending the Shops Act, 1950". The White Paper deals only with the question of shop hours and it will be interesting to see whether Parliament will find time to deal with this thorny problem.

Inspections and visits during the year were 332.

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

The first full year in the administration of this new Act was 1965, and the following report was made to the Ministry of Labour for the period 1st January to 31st December, 1965.

TABLE A
REGISTRATIONS AND GENERAL INSPECTIONS

<i>Class of Premises</i>	<i>No. of premises registered during the year</i>	<i>Total number of registered premises at end of year</i>	<i>No. of registered premises receiving a general inspection during the year</i>
Offices	41	166	122
Retail shops	80	378	158
Wholesale shops, warehouses	8	16	8
Catering establishments open to the public, canteens	9	52	27
Fuel storage depots	—	—	—
Totals	138	612	315

TABLE B
NUMBER OF VISITS OF ALL KINDS BY INSPECTORS TO REGISTERED PREMISES — 1,176

TABLE C
ANALYSIS OF PERSONS EMPLOYED IN REGISTERED PREMISES BY WORKPLACE

<i>Class of Workplace</i>	<i>No. of persons employed</i>
Offices	2,637
Retail Shops	1,952
Wholesale Department, Warehouses	128
Catering establishments open to the public	382
Canteens	48
Fuel Storage Depots	15
Total	5,162
Total Males	2,592
Total Females	2,570

TABLE D
EXEMPTIONS

One exemption in respect of office premises was granted under Part III—Sanitary Conveniences (Section 9).

ADDITIONAL STATISTICAL REPORT

During 1965 there were 1,176 visits to premises by Inspectors operating the requirements of the Act. These were as follows :—

General Inspections	315
Lighting Inspections	63
Accident Investigations	13
Re-inspections	785

Re-inspections were carried out as a result of 298 Notices issued drawing attention to the requirements of the Act in respect of the following matters :—

1. Exhibit Abstract of the Act	216
2. Provision of First-Aid box	138
3. Sanitary Accommodation :—	
(a) Mark accommodation	37
(b) Provide and/or repair lighting	41
(c) Cleanse and/or redecorate	36
(d) Disposal of sanitary dressings	3
(e) Provide effective ventilation	10
(f) Provide additional accommodation	15
	142
4. Provision of Thermometers	107
5. Washing Facilities :—	
(a) Provide hot and/or cold water	69
(b) Provide additional and/or separate accommodation	14
(c) Provide soap and towels	7
(d) Sundry repairs	5
(e) Provide and/or repair lighting	2
	97
6. Accommodation for clothing	27
7. Repairs to flooring and/or covering	22
8. Provision of Handrail	15
9. Provision of adequate heating	15
10. Overcrowding	13
11. Provision of effective ventilation	7
12. Provision of guards to machinery, etc.	6
13. Provision of drinking water	5
14. Miscellaneous items	19

SPECIAL REPORT ON LIGHTING STANDARDS

The Ministry of Labour has under consideration the making of Lighting Regulations under Section 8(2) of the Act, and in that respect requested local authorities to make a special narrative report for the last three months of 1965, with detailed information for the month of November.

Details of these reports already submitted to the Ministry of Labour are as follows :—

Narrative Report for the three months—October, November, December, 1965

QUESTION

1. General impression of the standards of lighting, both natural and artificial, in offices and shops, including staircases, corridors, wash places, etc.

ANSWER

1. *Offices and Shops.* The selling areas of shops were found to be better lighted than offices, with the exception of modern offices.

(a) *Offices :—*

Working areas—room for improvement with the exception of the modern office block.

Staircases, corridors, etc.—Adequate.

Cloakrooms and lavatories—Better general standard than shops.

(b) *Shops :*

Selling areas—Usually well lighted.

Store and stockrooms—On average poor.

Corridors, staircases—adequate, but not good.

Cloakrooms and lavatories—Adequate.

QUESTION

2. Examples of unsatisfactory lighting and whether these were associated with any particular class of premises.

ANSWER

2(a). *Offices.*

Estate Agents—Low level of artificial lighting.
Dwelling houses converted to offices—These comprise buildings built before 1914 where conversion did not result in good natural lighting and standards of artificial lighting have remained poor.

Offices associated with shops—Natural and artificial lighting often obstructed by storage of stock.

General—Typists' desks badly sited; typists when questioned preferred individual desk lights to other types; dirty fittings—diffusers of fluorescent tubes collect dust and the diffusers are discoloured by heat.

Much improvement could be effected by keeping fittings clean.

(b) *Shops.*

Off Licences—Stock rooms where stacking of crates resulted in reduction of natural and artificial lighting.

Confectionery (sweets)—The same comment as for Off Licences, but to a lesser degree.

Butchers—Cutting and chopping blocks placed against walls, thus putting the working surface in shadow.

Handicrafts—Lighting generally poor in those areas stocking woods, laminated plastics, etc., where also was found the circular saw.

General—Dirty fittings, as for offices shown above.

3. Whether any specific standards of lighting, in terms of lumens, have been recommended in advice to occupiers.

3. No, but when asked for guidance referred to the standard of the British Lighting Council.

4. Whether any instances of excessive glare have been noticed and what standards have been used in assessing it.

4(a). *Offices*: No points of excessive glare noted but several instances where naked bulbs were hung or placed within the vision of the worker. In some offices, e.g. solicitors, etc., the main lighting was found at the working surface. The adjustment necessary when looking from a bright area to one of lesser illumination must cause strain. Glare from the sun and bright light was noted in the modern office block with large window areas, necessitating the provision of blinds.

(b) *Shops*: In most shops the artificial lighting was so arranged as to provide adequate diffusion of light. The naked bulb was found in some stock rooms, but in the main these rooms are visited by staff for short periods only.

(c) *Standards*: No standard known to assess glare. Glare largely a matter of whether the light source impinges on the normal area of vision of the worker, and this must be of necessity, subjective.

Detailed Information on Lighting Standards for the month of November, 1965 only

(1) Number of office premises found where lighting, either natural or artificial, in lumens per square foot, measured at the working place (or working plane) where work is done, e.g. desk, filing cabinet, etc.

Twenty-two offices were inspected with 158 points of observation, as shown hereunder :-

LUMENS PER SQ. FT.				
<i>Under</i>				<i>Over</i>
5	5 - 10	10 - 15	15 - 25	25
7	17	33	41	60

(2) Standards of lighting in lumens per square foot in the working areas of shops, etc., stock-rooms, packing departments, preparation rooms, etc., compared with standards of lighting in the selling areas.

Forty-one shops were inspected with 215 points of observation as shown hereunder:-

LUMENS PER SQ. FT.					
<i>Under</i>				<i>Over</i>	
	5	5 - 10	10 - 15	15 - 25	25
Counters, Selling Areas, etc. .	3	9	8	49	39
Stock Rooms, Stores, etc. .	13	14	34	28	18

CLEAN AIR ACT, 1956

Complaints

Twenty-nine complaints were received during the year in connection with smoke nuisances. These were all dealt with informally.

Measurement of Atmospheric Pollution

Following the decision of the Council to join the National Scheme organised by the Department of Scientific and Industrial Research, Warren Spring Laboratory, for the measurement of atmospheric pollution, the first Station was put into operation in the Science Laboratory at Stoneleigh Secondary School, Vale Road, Ewell, on the 25th June, 1963. The Station is known as Ewell No. 1. A second Station, Epsom No. 1, came into service on the 27th October, 1964, and has been established in the Public Health Department, at the Town Hall, Epsom.

There are few industrial chimneys in this Borough and it is fair to say that most of the smoke now recorded comes from the chimneys of private houses.

The information now available from the two local Stations measuring smoke and sulphur dioxide would support the view that the amount of smoke in the atmosphere is decreasing. This also applies to sulphur dioxide, but to a lesser degree. The reason why the decreases are not parallel, is that when smokeless fuels are substituted for bituminous coal, the sulphur content emitted into the air is approximately the same.

The figure for smoke, already low in comparison with other districts immediately to the North-West, North and North-East of the Borough and considerably less than towns in the industrial Midlands and the North, show a marked decrease from the winter of 1963/64 to the winter of 1964/65. This trend, typical of the South-East of England generally, will undoubtedly continue. It is being brought about by a change in the social habits of householders, not so much as a desire to have clean air, but to have a quick, clean and readily available means of space heating and hot water by using gas, electricity and oil as the source of energy.

In 1957 the Council adopted the Model Bye-Law made under Section 61 of the Public Health Act, 1936, and Section 24 of the Clean Air Act, 1956, which provided that appliances for heating or cooking in new buildings should be suitably designed for burning any of the following fuels, namely : gas, electricity, coke or anthracite.

READINGS TAKEN FROM DAILY SMOKE AND SULPHUR DIOXIDE RECORDING APPARATUS AT
STONELEIGH WEST SECONDARY MODERN SCHOOL, VALE ROAD, STONELEIGH

Smoke Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1963	—	—	—	—	—	—	7	9	33	41	74	174
	1964	155	162	72	29	20	15	14	17	26	94	90	133
	1965												
Highest daily reading	1963	—	—	—	—	—	—	23	39	76	186	290	549
	1964	549	733	227	207	41	47	30	47	252	235	400	524
	1965	367	280	243	79	48	44	34	56				
Lowest daily reading	1963	—	—	—	—	—	—	1	1	3	8	8	43
	1964	13	9	13	3	4	5	3	4	3	11	7	11
	1965	10	22	14	9	7	3	4	4				

Sulphur Dioxide Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1963	—	—	—	—	—	—	36	30	74	106	190	320
	1964	303	326	225	116	111	81	74	54	77	256	242	274
	1965												
Highest daily reading	1963	—	—	—	—	—	—	89	113	185	314	568	690
	1964	943	938	412	489	191	249	154	133	218	510	983	752
	1965	545	647	562	338	170	333	142	142				
Lowest daily reading	1963	—	—	—	—	—	—	3	0	6	19	33	58
	1964	30	112	101	13	41	33	39	23	26	102	63	74
	1965	92	41	42	30	66	129	18	18				

EPSOM NO. 1

READINGS TAKEN FROM DAILY SMOKE AND SULPHUR DIOXIDE RECORDING APPARATUS AT
THE TOWN HALL, THE PARADE, EPSOM

Smoke Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1964	—	—	67	28	18	14	12	15	19	50	53	96
	1965	72											
Highest daily reading	1964	—	—	164	212	39	37	29	46	66	107	276	345
	1965	214	299	184	76	45	113	28	72				
Lowest daily reading	1964	—	—	15	4	3	4	2	3	3	11	3	11
	1965	7	14	10	6	3	2	4	5				

Sulphur Dioxide Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1964	—	—	161	98	83	70	57	54	55	133	178	200
	1965	163											
Highest daily reading	1964	—	—	321	394	191	233	117	101	177	301	886	538
	1965	355	562	319	255	213	298	73	74				
Lowest daily reading	1964	—	—	66	49	26	26	32	20	26	45	38	25
	1965	32	82	29	42	27	48	12	12				

EPSOM DOWNS

Sale of Food

Two cafes provide light refreshments although the small hutted one adjacent to the Downs Hotel closes during the winter months. The more permanent structure in No. 2 Upper Enclosure, Tattenham Corner, is connected to the sewer and has a piped water supply. During the periods when racing takes place these facilities are augmented by many mobile refreshment vans and tents. Constant inspection is made of the temporary food premises and generally a good standard of hygiene is maintained in spite of the difficulties in catering out of doors.

Samples of water, ice-cream and other foodstuffs are taken during Race Meetings and throughout the summer.

Temporary Sanitary Accommodation

This provision is for the periods covered by the four Race Meetings. The Corporation provides and staffs the five mobile conveniences which are connected to the sewers and have a piped water supply. The Epsom Grand Stand Association, Ltd., augment this accommodation by the erection of tent lavatories furnished with Elsan Closets.

Negotiations with the Epsom Grand Stand Association, Ltd., for the abolition of the tented conveniences are not making the expected progress, principally due to the possibility of a merger with another Racecourse Company.

Permanent Sanitary Accommodation

The Council gave approval for the provision of a public convenience on the Downs, and the necessary steps to implement this policy have been taken.

Cleansing

The cleansing of the Downs during and after Race Meetings is carried out under the direction of the Epsom Grand Stand Association, Ltd. Of recent years there has been a marked improvement in this service and the work is completed more quickly after the Meetings.

At other times the cleansing of the Downs is the responsibility of the Conservators.

LAND AT THE REAR OF CHESSINGTON ROAD AND COX LANE, WEST EWELL

Positive steps which included works to the site, were taken during 1965 to control the use of this land now in the possession of the Council.

The Council's plans to clear this land of rubbish, old iron, etc., extinguish the activities associated with car breaking, pig-keeping and stabling of ponies, and to provide public health services for the caravan dwellers, had so advanced at the end of the year as to anticipate their implementation early in 1966.

RODENT CONTROL

Prevention of Damage by Pests Act, 1949

In accordance with requirements of the above Act, occupiers of land or buildings are under an obligation to notify the Local Authority in writing, of the presence of rats or mice in substantial numbers. It is also the duty of every Local Authority to take such steps as may be necessary to secure, as far as practicable, that their district is kept free from rats and mice. They are empowered to make inspections and enforce owners and occupiers to carry out such operations as may be necessary for this purpose.

Advice and assistance are given to persons who report any such infestation or apply for information as to preventive measures. Such advice is based on methods of destruction recommended by the Infestation Control Division of the Ministry of Agriculture, Fisheries and Food.

One full-time Rodent Operative is employed in the Department and the following is a summary of the work carried out :-

<i>Number of</i>	1963	1964	1965
Complaints investigated	533	566	543
Inspections and visits	4,109	4,411	4,339
Premises found infested	583	627	526
Treatments carried out by the Corporation's			
Rodent Operative at :-			
Private premises	572	594	607
Business premises	129	133	130
Rats known to have been caught and destroyed	496	564	464
by the Corporation's Rodent Operative			

Sewer Rat Control

The treatment of sewers was continued during the year in accordance with the requirements of the Ministry of Agriculture, Fisheries and Food. The work is carried out by the Rodent Operative with the assistance of sewer men from the Borough Engineer's Department.

For the purpose of treatment, the Borough is divided into 13 Sections and sewer manholes in seven Sections were test baited followed by poisoning any manholes where evidence of infestation was found.

The results of this work were as follows :—

Number of manholes tested	137
Number of manholes tested—"takes"	11

The 11 manholes showing "takes" were rebaited plus 18 which were adjacent. Of the 29 manholes further so treated, six complete and nine partial "takes" were recorded.

Results over the past few years show that there is a steadily reducing rat population in the sewers principally due to these control methods.

INSECT AND OTHER PESTS

Requests for advice and assistance in dealing with household insect pests continue to be made and relate mainly to moths, furniture and carpet beetles, flies and ants.

Treatment, for which a charge is made, is proffered where advisable.

The cockroach and steam fly with Pharaoh's ant are the main insect pests of institutions, hospitals, bakehouses, etc., where disinfection treatment is carried out mainly by private Companies under contract.

Mosquito Control

The spraying of ponds and pools on Epsom Common and in other parts of the Borough was carried out as in previous years, which control measure helps to reduce nuisance from mosquitoes.

Destruction of Wasps' Nests

This service is carried out on request at a charge of 5s. per nest destroyed (no extra charge for additional nests treated at the time of visit).

During the year 347 nests were so treated in comparison with 95 in 1964, and the receipts amounted to £83. 0s. 0d.

Feral Pigeons—Control

For the first time a cage was brought into use. Although the number of sites where a cage can be placed is limited, 101 birds were trapped. Additionally, 28 were taken by hand from their roosting sites with 20 eggs destroyed.

All pigeons so taken are humanely killed and the bodies are cremated.

MORTUARY

The use of the Council's Mortuary for post-mortem purposes ceased in 1964, and until the new joint accommodation is ready at the Epsom District Hospital, the Board have agreed to undertake this work. The charge made for the service is £2. 2s. 0d. per body, and the cost for 1965 was £233. 14s. 0d.

The building scheme to provide modern mortuary facilities at the Epsom District Hospital which is a joint venture by this Council and other Local Authorities and the South West Metropolitan Regional Hospital Board, is due to start in the near future and until this scheme is in operation, the Epsom Mortuary will be maintained for mortuary purposes only.

MISCELLANEOUS

Pet Animals Act, 1951

This Act provides that no persons shall keep a pet shop except under licence granted by the local authority in accordance with the provisions of the Act and on payment of a fee not exceeding ten shillings. Four applications were received and licences granted in 1965.

Animal Boarding Establishments Act, 1963

This Act makes provision for a system of licensing and inspection by the local authority of any establishment at which a business of providing accommodation for cats or dogs is carried on.

Three licences were issued during the year.

Riding Establishments Act, 1964

This new Act which came into force on the 1st April, 1965, repealing the Act of 1939, provides for a system of yearly licensing and inspection by local authorities of riding establishments.

Briefly, in considering the application for a licence, a local authority must have regard to the suitability and qualification of the applicant and a report from a Veterinary Surgeon or Veterinary Practitioner of an inspection of the premises. The suitability of the horses kept at any such establishment is also a determining factor.

The Council re-appointed their Veterinary Surgeon (first appointed under the Act of 1939), and six riding establishments were licensed during the year.

Betting, Gaming and Lotteries Acts, 1963-64

Two applications for permits for the provision of amusements with prizes were made in respect of cafes and granted.

Nine applications for permits in respect of Licensed Premises were refused.

At the end of the year four permits were in force, all in respect of cafes.

Consumer Protection Act, 1963

Children's Nightdresses—Safety from Fire

The Children's Nightdresses Regulations, 1964, makes provision for all nightdresses coming within the scope of the Regulations to be made of a fabric which conforms to the low flammability requirements of British Standard 3121 : 1959, and where fabrics have been chemically treated to make them flame-resistant, cautionary labels against washing with soap must be attached.

Inspections have shown that stocks held complied with the Regulations.

Fire Guards—Heating Appliances

Regulations in force under this Act require that fireguards to gas fires, electric fires and oil heaters shall be robustly made and comply with certain specified standards of construction and fitting.

Oil Heaters—Construction

The Oil Heaters Regulations, 1962, made under this Act prescribe certain standards of construction and design and performance. The Regulations are based on British Standard 3300:1963, and to the knowledge of the Home Office, all oil heaters at present manufactured in this country are being made to this standard.

No complaints were received in respect of either of these Regulations and inspections of appliances for sale did not reveal any infringements.

Noise Abatement Act, 1960

Ten complaints were received, all being dealt with informally.

Rag Flock and Other Filling Materials Act, 1951

There are no premises in the Borough which are subject to registration under the provisions of this Act, and no samples of rag flock or other fillings were taken during the year.

Scrap Metal Dealers Act, 1964

This Act makes new provision for the local registration of all scrap metal dealers and every local authority is required to maintain a register of persons carrying on business in their area as scrap metal dealers.

There is no discretion to refuse registration, which can be effective for three years, and will be cancelled unless application is received for its renewal.

Apart from the registration by the local authority, the dealer is required to keep a record of his dealings in scrap metal and this record is subject to scrutiny by the Police.

The Act came into force on the 1st April, 1965, and 21 premises were registered.

PART FOUR

SCHOOL

HEALTH

SERVICE

BOROUGH OF EPSOM AND EWELL

EDUCATION COMMITTEE

Report of the School Medical Officer for the Year 1965

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present my first report as School Medical Officer since the Epsom and Ewell Education (Divisional Administration) Scheme came into operation on 1st April, 1965.

The number of pupils coming within the scope of the School Health Service was 8,046. The health of the children was well maintained with little infectious disease other than measles of a mild type which assumes epidemic form every second year. It is gratifying to report that no case of poliomyelitis has occurred since 1961, largely due to the introduction of a safe and effective oral vaccine. Full advantage was taken of the provision of school meals and of school milk in all maintained Schools though milk was less popular with secondary school pupils.

The number of handicapped pupils ascertained in need of special educational treatment was 287 representing just over 3 per cent. of the school population. Such pupils may be educated in special classes in the ordinary School or may be admitted to Special Schools depending on the nature of the handicap and the home circumstances. No difficulty has been met in placing handicapped children in Special Schools. When an educationally sub-normal pupil is recommended for training in a Special School he may be admitted to West Hill, Leatherhead or St. Phillip's, Chessington. If a suitable placement cannot be found for the pupil with multiple handicaps, he may be provided with a home tutor.

Nearly half (135) of the handicapped pupils had speech defects ; 44 children completed their speech training during the year and were deemed cured or improved. Due to a shortage of Speech Therapists, 26 children were on the waiting list for treatment at the end of the year. The present closer integration of the Audiology and Speech Therapy Services under the direction of Dr. E. A. Beet, the County Audiologist, makes the early diagnosis of hearing and speech defects easier and the training of the deaf child more effective. For the partially deaf of primary school age, we were fortunate in having two special classes at Riverview School, Ewell. The peripatetic teacher supplemented the work of the partially hearing unit by giving regular instruction to partially deaf children in their own homes and in the ordinary school.

I would like to thank the Members of the Committee for their interest and support and to thank the professional staff for their field work. I am indebted to Mr. R. A. Stay, my administrative assistant, and to the clerical staff for their assistance in the administration of the School Health Service and for their preparation of the statistical tables in this report.

I am, Mr. Chairman, Ladies and Gentlemen, Your obedient Servant,

PATRICK H. R. ANDERSON
School Medical Officer

School Population

The maintained school population at the end of the year was as follows :—

Primary	4,176
Secondary	3,816
Special	19
Nursery	35
	<hr/>
	8,046

The number of maintained school departments in the Borough on 31st December, 1965, was:—

Primary	18
Secondary	6
Special (Partially Hearing Unit)	1
Nursery Class (West Ewell School)	1
	<hr/>
	26

Routine Medical Inspection

Routine medical inspection by age groups is carried out as follows :—

<i>Primary</i>	(i) On entry	Complete medical examination
	(ii) During year in which age of 8 is reached	Eye and hearing test only
<i>Secondary</i>	(iii) On entry	Complete medical examination
	(iv) During year in which age of 13 is reached (if more than a year since last routine examination)	Eye test only
	(v) During year in which age of 15 is reached	Complete medical examination
	(vi) During year in which age 17 is reached (if more than a year since last routine inspection)	Eye test only

General Physical Condition

At each routine medical inspection School Medical Officers are required to assess the general physical condition of the children and to record the assessment under the headings "satisfactory" or "unsatisfactory".

In all cases the condition of the children was recorded as satisfactory.

Cleanliness Inspections

During the year 1,373 individual examinations of pupils were carried out by Health Visitors. Three pupils were found to have nits in the hair and one had head lice.

De-lousing material was supplied to the mothers concerned.

Defects found at Routine Medical Inspections

Number of pupils examined	4,206
Number of pupils found to require treatment	743
Percentage of pupils in need of treatment	17.7
Number of defects requiring observation	1,212
Number of defects requiring treatment	816

Parents present at Inspections

Parents were present at 1,026 routine medical inspections, a percentage of 24.4.

DENTAL INSPECTION AND TREATMENT

REPORT OF MR. G. B. ASHWORTH, F.D.S., SENIOR DENTAL OFFICER

Report on the Dental Services within the Borough of Epsom and Ewell for the year 1965

There are two fully equipped Dental Clinics within the Borough, one in modern premises at Ewell Court, Kingston Road, Ewell, and one in the new building in Church Street, Epsom.

Each Clinic is staffed by a full-time County Dental Officer and Surgery Assistant. Orthodontic Consultants conduct regular sessions for the treatment of irregularities of the teeth, and Specialist Anaesthetists attend for the administration of all general anaesthetics. X-ray facilities are available at both Centres.

The Services provided by these clinics are available to all school children, to expectant or nursing mothers and to pre-school children.

Children at all schools maintained by the Authority were inspected during the year. These included the pupils attending the Ewell Training Centre for the mentally handicapped. Children inspected at schools numbered 7,554 and a further 738 were examined in the Clinics at the request of the parents. Some 1,654 individual children actually received treatment during the year. A summary of the treatment provided is shown in Table V.

Dental Survey

A Report from the Department of Education and Science on the Dental Services 1962/63 stated that owing to the shortage of staff many children had left school without having been made dentally fit and were lacking in appreciation of the value of dental health. It was agreed with the Department that the Surrey County Council, together with other Authorities representing different parts of England and Wales, should take part in a survey of the dental condition of a 10 per cent. sample of girls and boys aged 15 years. Fifty-six boys and girls at schools in the Borough were selected for dental examination and the majority of parents agreed. When the findings of the Dental Surgeons are analysed by the Department the results will be reported.

The Promotion of Dental Health Amongst Children

Dental decay is the most prevalent of all diseases, especially in children. Our knowledge of its causes is incomplete but facts show that it is to a great extent preventable by continuous personal home care. The primary responsibility of maintaining the dental health of children rests with the parents, and through them on others who care for children. It rests largely with the parents whether or not the child will reach school age with a sound dentition. They have full control of the situation to give their child good, sound teeth or by neglect or ignorance to permit dental disease to become established with all the attendant evils of pain, infection and premature extractions.

Throughout childhood it is the parents who can contribute most to their children's dental health by the provision of a sensible and sound diet and the teaching of good habits of oral hygiene. The constant supply of essential foods for proper development must be maintained from the earliest months of pregnancy to adolescence. Sugar should be regarded primarily as a flavour rather than a food and it is essential and reasonable to impose a limitation as to the amount and time of its consumption. Children should be taught to confine their eating to meal times—no "between meal" snacks. If parents cannot resist demands, apples, nuts, raisins or carrots should be available for mid-morning breaks at home or at school. Dirty teeth are all too frequently observed at dental inspections. Children under seven need their teeth cleaning for them at bed-time and older children require supervision and inspection until the habit is ingrained and cleaning is effectively carried out. Regular visits to the dentist for inspection, advice and any necessary treatment should begin at two years of age and be maintained throughout childhood.

The presence of fluorides in domestic water supplies increases enamel resistance to decay. Where nature has added about one part per million of this trace element to the water, the teeth of children are less liable to decay. Many of our water supplies are deficient in this material, but in a number of places here in Britain and in other countries, this deficiency has been made good by adding fluoride to the water and has proved to be a most useful adjunct in the promotion of sound dental health in children.

While research is being continued to find ways of protecting the teeth, it is parents who can make the greatest contribution in controlling dental disease in their own children.

Employment of Children

(a) School Medical Officers carried out 86 examinations of children in order to ascertain their fitness to undertake part-time employment. All were found to be fit.

(b) Four children were examined in connection with applications for licences to take part in stage entertainment and all were found to be fit.

Child Guidance

As the catchment area extends beyond the Epsom and Ewell Borough the general administration of the Child Guidance Service is controlled by the County Medical Officer. Included in the accommodation in the new Health Clinic in Church Street is a suite of five rooms set aside as a Child Guidance Clinic open daily. The team of specialist officers consists of a Psychiatrist, Educational Psychologist, Psychiatric Social Workers and Play Therapists. Any pupil, whether attending a maintained or independent school, may attend at this Clinic.

At the end of the year, 14 maladjusted pupils were attending and nine had been recommended and accepted for Special Schools.

Young People's Consultation Service

This is a new venture and we think a much needed one. A continuation of the Child Guidance Clinic Service is envisaged for 1966 by setting up a Young People's Consultation Service at the Epsom Health Clinic. At first, this advisory centre will be open one evening a week and we hope that it will attract young people who wish to discuss their growing-up problems, in strict confidence, with a Psychiatric Social Worker or a Psychotherapist.

Speech Therapy

The general administration of this service is also controlled by the County Medical Officer. Three Speech Therapists are employed on a part-time basis at the Ewell Court and Epsom Clinics. Due to a general and local shortage of Speech Therapists, 25 pupils were on the waiting list for speech training at Ewell. Details of the work carried out by Speech Therapists during the year are given below.

	<i>Epsom</i>	<i>Ewell</i>
Number of treatment sessions	134	88
Number of consultation sessions with parents and teachers	5	4
Number of children treated during the year	66	60
Number of children discharged during the year :-		
(a) Cured	13	5
(b) Improved	14	12
(c) Other reasons	1	7
Number under treatment at end of year	37	36
Number awaiting treatment at 31st December, 1965	1	25

The Autistic Child

Special educational treatment is now provided for the autistic, i.e. the non-communicating child. In former years autism was often confused with non-development of speech due to deafness. The causes of autism are multiple and complex and include insecurity, deprivation and brain damage. The Invalid Children's Aid Association has opened a Residential School for this type of handicapped pupil. This School, named the Edith Edwards House School, Park Road, Banstead, is accommodated in recently adapted buildings, formerly known as The Boys' Surgical Home, and can accommodate 21 children between the ages of 5 and 13 years. Children so handicapped may be sponsored for admission by the Local Education Authority where they live and the School has a wide catchment area.

Convalescent Homes

Any delicate child who attends a school maintained by the Local Education Authority may be provided with convalescent home treatment, free of charge. Such treatment may be recommended for periods up to four weeks.

During 1965, seven school children were sent for convalescent holidays by the Council.

School Eye Clinics

Ophthalmic Surgeons visited the Ewell Court and Epsom Clinics regularly throughout the year and below is given a summary of work carried out :-

Number of sessions	64
Number of children who attended during the year	460
Number of attendances during the year	950
Number of examinations for errors of refraction (including squint):-	
(a) Glasses ordered or re-ordered	258
(b) Glasses not ordered	622
Number referred for orthoptic or surgical treatment of squint	12
Number referred to Hospital for treatment unobtainable at Clinic	2

Postural Defects

A qualified physiotherapist attended at the two main Clinics to conduct remedial exercises classes for children with orthopaedic defects relating to posture and feet.

Number of sessions	53
Number of children treated in 1965.	75
Number of attendances	279
Number of new cases admitted during the year	55
Number of cases discharged	13

Bed Wetting

In the course of the year 10 children were loaned electric enuresis alarms, with varying degrees of success.

Early Diagnosis and Treatment of the Deaf Child

The aim of the Health Visitors and School Medical Officers is to ascertain all young deaf children and to make plans for their special treatment before they enter School at the age of 5 years. To ensure that no deaf children have been missed, all pupils aged 6-7 years are given a routine pure-tone audiometer test in School. In 1965, 590 pupils were so tested and of these 41 (or 6.9 per cent.) showed significant hearing defect (see Table VI).

At the end of the year the ascertained hard of hearing children were :-

Under 5 years of age

At Special Schools :-

Partially deaf	. . . . .	Nil
Totally deaf	. . . . .	3

Over 5 years of age

(a) At Special Schools :-

Partially deaf	. . . . .	7
Totally deaf	. . . . .	2

(b) In ordinary Schools and under supervision by Medical Officers and Teachers of the Deaf 6

Hearing Aid provided

In age groups—0-5	. . . . .	2
5 and over	. . . . .	12

Protection against Tuberculosis

With the active co-operation of Head Teachers, the scheme was continued for the protection of school leavers (age groups 13-14) by inoculation with B.C.G. vaccine. 81.8 per cent. of parents gave their consent and 596 children were inoculated. In addition 18 older pupils were inoculated in 1965.

School Meals and Milk

The following is a summary showing the number of children taking meals and milk on a day in September 1965.

Category	Total No. in Attendance	MEALS			MILK	
		Free	Full Cost	% of total taking meals	No. taking milk	% of total taking milk
Infant	1539	31	1215	80.9	1514	98.3
Junior	2340	46	1903	83.2	2191	93.6
Secondary	3679	48	2938	81.1	2202	59.8
Totals	7558	125	6056	81.7	5907	78.1

Deaths of School Children

Deaths of children of school age during the year were as follows :-

Girl aged 5 years	. . . .	Brain Tumour
Boy aged 6 years	. . . .	Road Accident
Girl aged 7 years	. . . .	Congenital Heart Disease
Girl aged 12 years	. . . .	Leukaemia
Girl aged 13 years	. . . .	Acute Heart Failure
Boy aged 13 years	. . . .	Accident in the home
Girl aged 16 years	. . . .	Congenital Heart Disease

National Child Development Study

The 1958 Perinatal Mortality Survey related to 17,000 children born during the week 2nd to 9th March, 1958. Through the co-operation of doctors and midwives comprehensive information was obtained about each mother and child. As an extension of the original investigation there

was a need to assess the physical, educational and emotional status of the growing child. During 1965 parents who were included in the original Survey were asked to complete a questionnaire about their children and to permit the child to undergo a full medical examination by a Medical Officer of the Local Authority. Fourteen children of this Borough were included in the Survey and, with only one exception, the parents co-operated in this extension of the Study.

Handicapped Pupils

Table III sets out by categories the handicapped pupils ascertained as at 31st December, 1965, and shows what provision was made for their special educational treatment.

TABLE I

A. Periodic Medical Inspections

<i>Age Groups Inspected (by years of birth)</i>	<i>Number of Pupils Inspected</i>	<i>Pupils Found to Require Treatment</i>		
		<i>For defective vision (excluding squint)</i>	<i>For any other condition recorded on Table II</i>	<i>Total individual pupils</i>
1961 and later	26	1	2	3
1960	623	15	76	79
1959.	131	1	16	15
1958.	31	3	5	8
1957.	605	54	2	54
1956.	65	6	4	10
1955.	23	2	2	3
1954.	380	61	32	84
1953.	505	75	31	97
1952.	795	128	15	138
1951.	150	28	7	33
1950 and earlier	872	204	34	219
Totals	4,206	578	226	743

B. Other Inspections

Notes

A special inspection is one that is carried out at the request of a parent, doctor, nurse, teacher or other person.

A re-inspection is a follow-up inspection arising from one periodic medical inspection or out of a special inspection.

Number of special inspections	852
Number of re-inspections.	434
Total	1,286

C. Infestation with Lice

- (i) Number of individual examinations of pupils in Schools by Health Visitors 1,373
- (ii) Number of individual pupils found to be infested 4
- (iii) Number of individual pupils in respect of whom cleansing notices were issued, Nil

TABLE II

A. Return of Defects Found in the Course of Medical Inspection in 1965

<i>Defect or Disease</i>	<i>Periodic Inspections</i>		<i>Special Inspections</i>	
	<i>Requiring treatment</i>	<i>Requiring to be kept under observation</i>	<i>Requiring treatment</i>	<i>Requiring to be kept under observation</i>
Skin	16	71	—	—
Eyes :—				
(a) Vision	589	328	194	324
(b) Squint	11	8	—	1
(c) Other	1	56	—	1
Ears :—				
(a) Hearing	10	40	47	21
(b) Otitis media	7	14	—	—
(c) Other	6	19	1	—
Nose and Throat	16	143	1	5
Speech	15	30	20	4
Cervical Glands	—	30	—	—
Heart and Circulation	—	28	—	—
Lungs :—				
(a) Pulmonary tuberculosis (definite)	—	—	—	—
(b) Other lung diseases	10	56	4	1
Development :—				
(a) Hernia	1	5	—	—
(b) Other	5	66	—	3
Nervous System :—				
(a) Epilepsy	4	4	—	—
(b) Other conditions	11	25	—	5
Orthopaedic :—				
(a) Posture	24	43	—	1
(b) Foot defects	47	54	1	—
(c) Other	27	78	1	—
Psychological :—				
(a) Development	1	7	7	—
(b) Stability	1	43	14	2
Other Diseases	14	64	—	6
Totals	816	1,212	290	374

TABLE III

Handicapped Pupils as Ascertained at 31st December, 1965

<i>Category</i>	<i>At ordinary school under medical supervision</i>	<i>At special school or Hospital School</i>	<i>Attending Speech Clinic</i>	<i>Attending Child Guidance Clinic</i>	<i>At ordinary school—on waiting list for special school</i>	<i>Home teaching provided</i>	<i>Under school age and under medical supervision</i>	<i>At ordinary school—on waiting list for Speech and Child Guidance Clinics</i>	<i>At home awaiting admission to special school</i>	<i>Total</i>
Blind and partially sighted.	—	1	—	—	—	—	1	—	—	2
Deaf and partially deaf .	6	10	—	—	—	—	—	—	1	17
Delicate	3	6	—	—	—	—	—	—	1	10
Physically handicapped .	20	11	—	—	3	—	2	—	2	38
Educationally sub-normal .	21	28	—	—	—	1	4	—	1	55
Epileptic	5	1	—	—	—	1	—	—	—	7
Maladjusted	—	9	—	13	—	—	—	1	—	23
Speech	—	—	109	—	—	—	4	22	—	135
Totals	55	66	109	13	3	2	11	23	5	287

TABLE IV

Treatment of Pupils attending Maintained Primary and Secondary Schools

(a) *Diseases of the Skin*

	<i>Number of cases treated or under treatment during year</i>
Ringworm—(i) Scalp	—
(ii) Body	1
Scabies	—
Impetigo	—
Other skin diseases	1
Total	<u>2</u>

(b) *Eye Diseases, Defective Vision and Squint*

	<i>Number of cases dealt with</i>
External and other, excluding errors of refraction and squint	5
Errors of refraction (including squint)	880
Total	<u>885</u>
Number of pupils for whom spectacles were prescribed	258

(c) *Diseases and Defects of Ear, Nose and Throat*

	<i>Number of cases treated</i>
Received operative treatment for adenoids and chronic tonsillitis	7
Received other forms of treatment	14
Total	<u>21</u>

(d) *Orthopaedic and Postural Defects*

	<i>Number known to have been treated</i>
(a) Pupils treated at Clinics or Out-Patient Departments	75
(b) Pupils treated at School for postural defects	68
Total	<u>143</u>

(e) *Other treatment given*

	<i>Number of cases treated in 1965</i>
Cervical glands	—
Heart and circulation	1
Lungs	9
Development:— (a) Hernia	1
(b) Other	1
Nervous :— (a) Epilepsy	8
(b) Other	9
Miscellaneous Minor Ailments	27
Total	<u>56</u>

TABLE V
Dental Inspection and Treatment

1. Number of pupils inspected	8,292
2. Number found to require treatment	3,028
3. Number treated at school dental clinics	1,654
4. Number of attendances made by pupils for treatment	5,004
5. Number of half days devoted to inspections	88
6. Number of half days devoted to treatment	875
7. Number of permanent teeth extracted	212
8. Number of permanent teeth filled	1,931
9. Number of temporary teeth extracted	559
10. Number of temporary teeth filled	1,276
11. Total number of teeth filled	3,207
12. Number of administrations of general anaesthetics	369
13. Number of pupils X-rayed	21
14. Number of scalings and gum treatments	75
15. Number of teeth conserved with silver nitrate	49
16. Number of teeth root filled	4
17. Courses of treatment completed	1,196
18. Orthodontics :-	
Cases remaining from previous year	221
New cases commenced during year	43
Cases completed during year	39
Cases discontinued during year	11
Number of removable appliances fitted	100
Number of fixed appliances fitted	2
Pupils referred to hospital consultant	2
19. Prosthetics :-	
Number of pupils supplied with full upper or full lower denture	1
Number of pupils supplied with partial denture	5

TABLE VI
Audiometry

	<i>Routine Examinations</i>	<i>Retests and Specials</i>	<i>Total</i>
Number of children tested	590	70	660
Number of children who failed test	41	31	72
Result of investigations by School Medical Officers :-			
Deafness due to :-			
(a) No significant hearing loss	8	6	14
(b) No significant hearing loss but child appears to be mentally retarded	—	—	—
(c) Catarrhal conditions	17	7	24
(d) Old otitis media	11	9	20
(e) Injury	—	—	—
(f) Other causes	—	1	1
(g) Undetermined cause	1	3	4
(h) Untraced or left district	—	1	1
(i) Already supplied with hearing aids	—	—	—
(j) Investigations remaining to be carried out	4	4	8
	41	31	72
Recommendations :-			
(a) No action required	—	9	9
(b) For observation only	—	—	—
(c) Referred to Audiology Clinic	16	10	26
(d) Referred to general practitioner	7	1	8
(e) Referred to Ear, Nose and Throat Consultant	15	4	19
(f) Special position in class	32	12	44
(g) Hearing aid and supervision by Teacher of Deaf	—	—	—

TABLE VII

Notification of Communicable Diseases by Head Teachers during 1965

(a) *Infectious Diseases*

<i>Disease</i>	<i>Suffering</i>	<i>Excluded on Suspicion</i>	<i>Infection at Home</i>	<i>Total Exclusions</i>
Smallpox	—	—	—	—
Diphtheria	—	—	—	—
Scarlet Fever	24	—	—	24
Enteric Fever	—	—	—	—
Measles	332	—	—	332
Whooping Cough	7	—	—	7
German Measles	60	—	—	60
Chickenpox	187	2	—	189
Mumps	6	—	—	6
Jaundice	—	—	—	—
Other	3	—	—	3
Totals	619	2	—	621

(b) *Contagious Diseases*

<i>Disease</i>	<i>Suffering</i>	<i>Excluded on Suspicion</i>	<i>Total Exclusions</i>
Ringworm	1	—	1
Impetigo	—	—	—
Scabies	—	—	—
Other	1	—	1
Totals	2	—	2

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